

September 3, 2020

The Honorable Gavin Newsom Governor, State of California State Capitol, Suite 1173 Sacramento, CA 95814

Via leg.unit@gov.ca.gov

Re: SB 855 (Wiener) – Health Coverage of Mental Health and Substance Use Disorders – Request for Signature

Dear Governor Newsom,

On behalf of Mental Health America of California (MHAC) we write to express our enthusiastic support for Senate Bill 855 (Wiener).

Mental Health America of California is the state's leading community based nonprofit dedicated to addressing the needs of those living with mental health challenges and promoting the overall health of all Americans. Mental Health America of California was founded in 1957, has six affiliates, and one associate organization in the State. Mental Health America of California has long sought to promote behavioral health as a critical part of overall wellness and to advocate on behalf of those experiencing mental health conditions.

If signed into law, SB 855 will increase access to mental health and substance use disorder (MH/SUD) care for the 13.4 million Californians enrolled in state-regulated plans who too often have coverage arbitrarily and wrongfully denied by insurers.

Coverage denials based on insurers' determinations that MH/SUD care is "not medically necessary" are a primary way that insurers limit access to MH/SUD care and undermine the promise of both the federal Mental Health Parity and Addiction Equity Act and the Affordable Care Act. These inappropriate medical necessary denials for needed MH/SUD care frequently limit the treatment patients' receive to only late-stage crisis care and short-term symptom reduction rather than treatment for the underlying chronic condition. By putting in place common-sense rules that require insurers to follow generally accepted standards of mental health and substance use disorder care, SB 855 will significantly reduce these inappropriate denials and increase access to early treatment that addresses the patient's underlying condition.

SB 855 also puts in place a much-needed definition that insurers must use when making medical necessity determinations for MH/SUD services that is based on the definition endorsed by the American Medical Association and the American Psychiatric Association. Lacking such a required definition currently, insurers use their own flawed definitions to inappropriately deny coverage – resulting in nearly 60 percent of initial MH/SUD denials reviewed through the independent medical review (IMR) process being overturned in favor of the patient (or revised by the health plan in the patient's favor). Unfortunately, few patients denied coverage make it to the IMR process, making it essential to improve the accuracy of initial coverage

www.mhac.org

¹ DMHC Independent Medical Review Determinations, California Health and Human Services Open Data, https://data.chhs.ca.gov/dataset/independent-medical-review-imr-determinations-trend

determinations.

SB 855 also prevents insurers from shift costs to Medi-Cal and other state, county, and local programs. Our communities (and taxpayers) should no longer be left paying the price for preventable disability, unemployment, homelessness, and even incarceration that often results when insurers refuse to cover needed MH/SUD services.

The collision of the COVID-19 pandemic and the opioid epidemic has made increasing access to MH/SUD treatment even more urgent.² Forty-four percent of Californians are reporting symptoms of clinical depression and anxiety³ and drug overdoses are rising across the state.⁴ According to a recent CDC study, one in four young adults between the ages of 18 and 24 say they've considered suicide in the past month because of the pandemic.⁵ The toll is falling heaviest on young adults, caregivers, essential workers and minorities. Our state's Black and Latino residents are already overrepresented in essential workforces, experience the highest rates of coronavirus transmission and deaths in the state,⁶ and will continue to shoulder the burden of the economic crisis.⁷ While these deep inequities require a systematic and multi-pronged response, SB 855 is one piece of the puzzle towards ensuring that individuals with MH/SUD can access the services they need, particularly at a time when public budgets are severely constrained.

SB 855 is vital legislation in the face of a worsening mental health and addiction crisis. We urge you to sign SB 855 to make California a leader in ensuring its residents can access to the MH/SUD care they need, thereby reducing the enormous harms of untreated mental illness and addiction, lowering comorbid health care costs, and preventing cost-shifts to taxpayers.

Sincerely,

Heidi L. Strunk President & CEO

Cc: Angela Hill, Legislative Director, Senator Scott Wiener, Angela.Hill@sen.ca.gov

Daphne Hunt, Deputy Secretary, Office of Legislative Affairs – California Health and Human Services Agency daphne.hunt@chhs.ca.gov

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² Becker, Rachel. A collision of epidemics: Coronavirus disrupts addiction treatment, Calmatters, June 16, 2020. https://calmatters.org/projects/california-coronavirus-treatment-drugs-opioid-addiction/

³ U.S. Census Bureau, Household Pulse Survey, 2020, https://www.cdc.gov/nchs/covid19/pulse/mental-health.htm.

⁴ Rise in Drug Overdoses Could Be Tied to Coronavirus Unemployment," City News Service, June 4, 2020, https://patch.com/california/san-diego/rise-drugoverdoses-could-be-tied-coronavirus-unemployment.

⁵ CDC: One quarter of young adults contemplated suicide during the pandemic. Brianna Ehley Politico, August 13, 2020. https://www.politico.com/news/2020/08/13/cdc-mental-health-pandemic-394832

⁶ Samantha Artiga and Kendal Orgera. Key Facts on Health and Health Care by Race and Ethnicity, Kaiser Family Foundation, November 12, 2019. https://www.kff.org/disparities-policy/report/key-facts-on-health-and-health-care-by-race-and-ethnicity/

⁷ Altamn, Drew. Coronavirus' unequal economic toll. Axios. May 29, 2020. https://www.axios.com/coronavirus-economy-jobs-unemployent-racial-disparities-29e3c6c4-bb43-4eaf-bf90-04697ca66b2d.html