

June 7, 2022

The Honorable Jim Wood, Chair
Assembly Health Committee
1020 N Street, Room 390
Sacramento, CA 95814



RE: SB 858 (Wiener) – SUPPORT

Dear Chair Wood,

Mental Health America of California (MHAC) is a peer-run organization that has been leading the state in behavioral health public policy and advocacy since 1957. The mission of MHAC is to ensure that people of all ages, sexual orientation, gender identity or expression, language, race, ethnicity, national origin, immigration status, spirituality, religion, age or socioeconomic status who require mental health services and supports are able to live full and productive lives, receive the mental health services and other services that they need, and are not denied any other benefits, services, rights, or opportunities based on their need for mental health services. In accordance with our mission, we strongly support efforts which increase access to behavioral health care for Californians.

MHAC is in strong support of SB 858, which will increase timely access to behavioral health services, help to ensure adequate provider networks, and increase enforcement of California’s parity laws.

The Department of Managed Healthcare (DMHC) protects the health and mental health care rights of the majority of Californians. Yet, the maximum basic fine of \$2,500 that DMHC is authorized to impose on health plans has not increased since the late 1970’s—over 40 years ago. Since this time, health plan revenues and profits have increased exponentially. Because DMHC fines and penalties are intended to deter health plans from failing to comply with the law, it is imperative that DMHC is authorized to impose fines of an amount significant enough to encourage ongoing compliance with the law.

In 2020 only 53.8% of insured nonelderly adults in California who reported a need for mental health treatment received that treatment.¹ Mental health consumers in California face a number of avoidable challenges in accessing behavioral health care. These include, among others, provider “ghost lists”², inadequate provider networks, and plans that do not comply with California’s parity laws. The increased fines and civil

¹ Panchal N., Young, G. et al. *A Snapshot of Mental Health and Access to Care Among Nonelderly Adults in California*. Kaiser Family Foundation, March 17, 2022. Accessed at: <https://www.kff.org/coronavirus-covid-19/issue-brief/a-snapshot-of-mental-health-and-access-to-care-among-nonelderly-adults-in-california/>

² Provider “ghost lists” or “ghost networks” refer to provider directories which contain a large number of providers who are unavailable to provide treatment or services. Providers may be not taking new clients, their contact information may be wrong, or they may have stopped accepting that insurance. See <https://www.washingtonpost.com/health/2022/02/19/mental-health-ghost-network/>

penalties authorized in SB 858 will have a significant impact on removing these barriers and increasing access to behavioral health care for insured Californians.

If you have any questions and or if Mental Health America of California can be of any assistance on this or any other behavioral health bill, please contact me or our Interim Director of Public Policy Karen Vicari at kvicari@mhaofca.org.

In Community,



Heidi L. Strunk
President & CEO