

Public Stakeholder Listening Session on Strategies for Improving Parity for Mental Health and Substance Use Disorder Coverage 82 FR 30876

Oral Comments Submitted to U.S. Department of Health and Human Services
July 27, 2017

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Thank you for the opportunity to make oral comments on *Strategies for Improving Parity for Mental Health and Substance Use Disorder Coverage* (Document 82 FR 30876). I am representing the National Association of Social Workers (NASW), the largest professional social work organization in the United States with a membership of 125,000 social workers.

The social work profession promotes the well-being of individuals, families and communities and social workers often serve vulnerable populations with chronic mental and physical conditions. Social workers work as private practitioners and are employed in a variety of health care, behavioral health and community based settings. Social workers provide psychosocial support to patients and families and help individuals reach their personal goals while living with mental illness and substance use disorders. Clinical social workers provide clinical assessment and treatment for mental health conditions, such as depression and anxiety, and are the largest group of providers of mental health services in the U.S.

Significant gains have been made in accessing mental health and substance use disorder services since the implementation of the Mental Health Parity and Addiction Equity Act, and the Patient Protection and Affordable Care Act. Mental health and substance use disorder parity provisions and enforcement have positively affected both patient populations that social workers serve, and opportunities for professional social workers by encouraging greater access to behavioral health services.

For the health of the United States to improve on a population level, evidence-based, comprehensive mental health and substance use disorder treatment must be accessible. There is continued need to improve, clarify and strengthen parity provisions. NASW hopes that

further federal and state guidance will be issued to clarify the definition of parity and NASW recommends the development of mental health parity standards to provide consistency in how parity is implemented among insurance companies. NASW supports requirements to improve transparency of coverage and have insurance companies outline the process under each health plan offered to access behavioral health services, highlighting any pre-approvals or medical necessity reviews. NASW encourages HHS to eliminate barriers to evidence-based behavioral health interventions, for example, having insurance plans cover residential services for substance use disorder treatment, which may exceed specified outpatient visit limits or the length of comparable inpatient stays for medical/surgical benefits. NASW encourages HHS to have insurance companies report on in-network provider capacity in relation to the needs of consumers in the network to determine if insurance networks are meeting the demand for services at the local level.

As we have all seen with the devastating impact of the opioid and heroin crisis in the U.S., the consequences of inadequate access to behavioral health services reverberate into communities and strain public and private resources. Improving coverage for and access to behavioral health services is one step to improving the health of people and strengthening communitites. Advances in parity also serve to reduce the stigma of mental health and substance use disorder services and embrace behavioral health services as a routine part of health care for Americans.

Thank you for your consideration of these comments. Please feel free to contact NASW or me at cdorn.nasw@socialworkers.org or 202-408-8600, Ext. 453.