

March 15, 2017

Re: Support for SB 860

Chair Gelser and Members of the Committee:

My name is David Sant. I am a Licensed Clinical Social Worker (LCSW) and board member of the National Association of Social Workers (NASW) Oregon Chapter, a professional association founded in 1971 that represents over 1,500 Oregon social workers. Social workers are trained in mental and behavioral health and provide over half of the talk therapy in this state, including individual, family and relationship counseling. Many of our members are social workers in private practice who contract with insurance companies to provide talk therapy similar to other mental health care providers.

**On behalf of NASW Oregon, I am here to ask for your support of SB 860.**

With the advent of the Affordable Care Act and Oregon statute 743A.168, private insurance companies are required to reimburse mental health practitioners in a way that is equivalent to medical providers. This law acknowledges that mental health is just as vital to one's overall wellness as physical health and ensures Oregonians have access to mental health services as part of their insurance plans.

Unfortunately, private insurance companies have demonstrated that they are not in compliance with existing law and have been limiting reimbursement to providers in several ways:

- a. Non-equivalent reimbursement—Unlike rates paid to medical providers, rates paid to mental health providers have declined or stayed basically flat over the last decade. Our members report that maximum allowable rates for LCSWs may have decreased 50% under some plans.
- b. Restrictive utilization policies and management procedures—Insurers restrict the use of behavioral mental health outpatient office visit procedures more stringently than medical outpatient office visit procedures. For example, some insurers reimburse exactly the same for 45- and 60-minute sessions or only allow 60-minute sessions in “non-routine” cases. Our members report that providers who frequently use 60-minute sessions are aggressively audited. We do not believe the same level of scrutiny is applied to medical outpatient office visits.

As a result of these practices, providers have been forced to either accept inadequate reimbursement or not enter into contracts with insurers. When fewer providers are willing to go in-network, the result is a narrowing of provider panels within insurance plans, and some providers have even gone out of business. **The impact to consumers is fewer choices and restricted access to mental health care**, which is contrary to the spirit of Oregon mental health parity law.

Oregonians should have options for mental health care just like they do for medical care. When people have fewer options to seek mental health treatment, symptoms can escalate and result in crises that are expensive for payers, consumers and the state.

**SB 860 would assure relative equivalency of each insurance plan's in-network medical and behavioral mental health provider panels by requiring the Oregon Department of Consumer and Business Services (DCBS) to investigate and remedy parity discrepancies in how reimbursement rates are established.**

NASW Oregon stands in solidarity with mental health practitioners and the Oregonians that they serve and ask you to vote yes on SB 860.

Sincerely,

David Sant, LCSW  
Board Member, NASW Oregon Chapter