

Improving Access to Behavioral Health Treatment Through: Expanding Parity and Telehealth

July 23, 2020



Improving Access to Behavioral Health Treatment in Georgia

- demand for behavioral health services and treatment in Georgia will continue to increase
- growing anxiety, grief, depression, unemployment, and substance use
- federal and state level investment in behavioral health service provision will be necessary
- the state can **increase access to treatment in a low-cost and effective way by expanding telehealth services and enforcing parity** in insurance coverage of behavioral health



Average Share of Adults Reporting Symptoms of Anxiety or Depressive Disorder During the COVID-19 Pandemic, June 2020



NOTE: These adults, ages 18+, have symptoms of anxiety or depressive disorder that generally occur more than half the days or nearly every day. Data presented is the average of four weeks of data: June 4-9, June 11-16, June 18-23, and June 25-30.

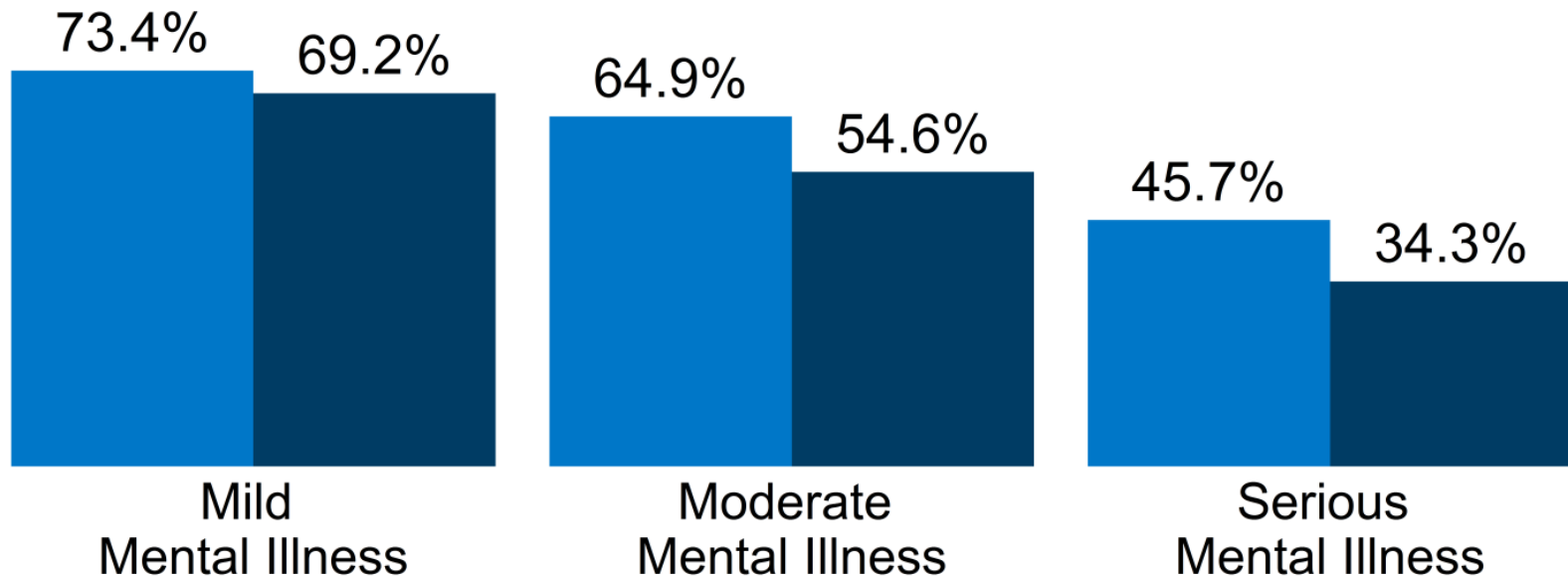
SOURCE: KFF analysis of U.S. Census Bureau, Household Pulse Survey, 2020.

KFF



Adults with Mental Illness in Past Year Who Did Not Receive Mental Health Treatment, 2017-2018

■ Georgia ■ United States



NOTE: In this state, there are no statistically significant differences from the U.S.

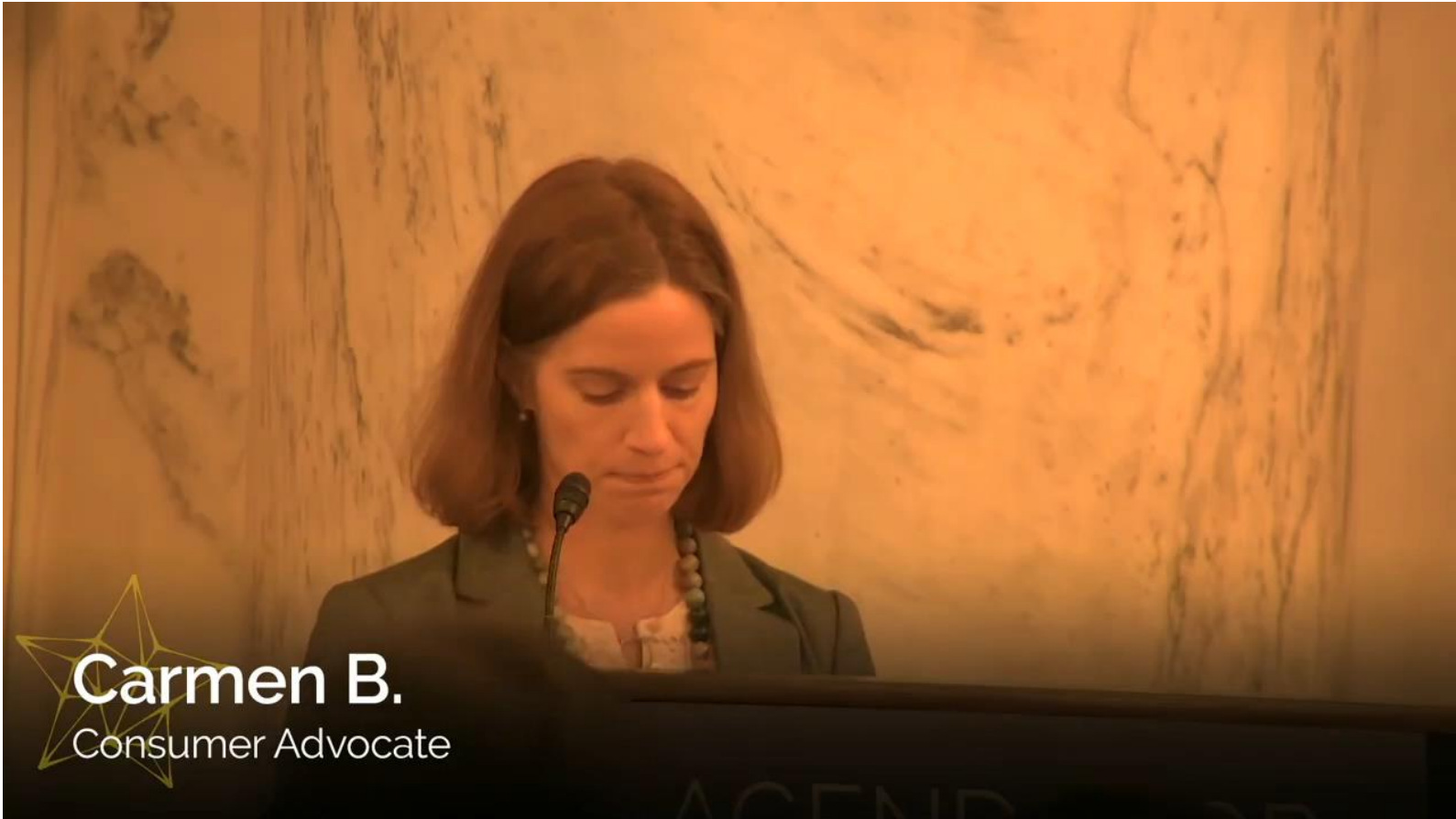
Data represents adults ages 18+.

SOURCE: KFF analysis of SAMHSA's restricted online data analysis system, National Survey on Drug Use and Health 2017-2018.

KFF



A Consumer Voice



Carmen B.
Consumer Advocate



Prioritizing Parity

- **parity is fundamental to access to treatment**
- **leads to better health outcomes, decreased need for hospitalization or crisis services, and increased productivity from employees**
- parity is central to all the issues being considered by the Behavioral Health Reform and Innovation Commission
- Georgia's Department of Community Health and the Office of the Commission of Insurance and Fire Safety enforce parity



Georgia Department of Insurance

- analyzes the market conduct of private insurers
- works with and/or takes action against insurers
- communicates with the National Association of Insurance Commissioners and other states

Georgia Department of Community Health

- validates care management organization claims data in several areas
- developed a new data book and summary reporting tool using the Mental Health Parity Data Book as a guide and distributed to CMOs
- selecting one CMO per quarter for in-depth analysis beginning in 2020



Consumer Complaint Portal

Complaint Submission

John F. King
Commissioner

Office of Insurance and Safety Fire Commissioner

Logged in as helen.robinson@cartercenter.org [logout](#)

Complainant Information

Once you start entering information to submit your complaint, you cannot save your entry and return later to complete your submission. For security reasons, the system will time-out after two hours of inactivity. All fields marked with an asterisk () are required fields on each screen in the complaint submission process. If you are submitting this complaint on behalf of a business or company, such as a doctor's office, attorney's office, body shop, etc., please check the box above the wording "Submitting on behalf of Organization/Entity?" and enter your company's name in the box that displays after the box is checked.*

Complainant Information	Insured Information	Complaint Against	Insurance Information	Complaint Details	Documentation and Declaration	Review Complaint
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Please check box if complainant information is the same as account information. Fields will be auto-populated with account information.

Name

Prefix (eg: Mr., Ms., Mrs.)*

First*

Middle

Last*

Suffix (eg: Jr., III)

Submitting on behalf of a Business/Organization/Entity? If so, check box and enter name of Business/Organization/Entity.

<https://www.oci.ga.gov/ConsumerService/complaintprocess.aspx>



Areas of Opportunity: Administrative

- cross-departmental collaboration
- data transparency and accountability from insurance companies responsible for implementing parity
- publish regular reports
- make it easier for consumers to report violations
- improve the monitoring and accountability framework
- increase enforcement



Areas of Opportunity - Legislative

Continue the momentum of recent legislation:

- HB 888 - bans surprise billing in emergency and non-emergency situations beginning in 2021 and authorizes Georgia's Department of Insurance to establish an [all payer claims database](#) (APCD) that will inform the surprise billing payment resolution process.
- SB 482 - builds on HB 888 by setting up an advisory body to assist in the creation of the APCD.
- HB 789 - creates a surprise bill rating system for transparency.
- HB 1114 - provides Medicaid coverage for six months after giving birth, increased from the current 60-days.



O.C.G.A. § 33-24-28.1

(b) Every insurer authorized to issue accident and sickness insurance benefit plans, policies, or contracts shall be required to make available, either as a part of or as an optional endorsement to all such policies providing major medical insurance coverage which are issued, delivered, issued for delivery, or renewed on or after July 1, 1984, coverage for the treatment of mental disorders, which **coverage shall be at least as extensive and provide at least the same degree of coverage as that provided by the respective plan, policy, or contract for the treatment of other types of physical illnesses.**



Areas of Opportunity - Legislative

- update all relevant state code sections to refer to most recent *Diagnostic and Statistical Manual of Mental Disorders* (DSM)

§ 33-24-28.1. Coverage of treatment of mental disorders

(2) "Mental disorder" shall have the same meaning as defined by *The Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association) or *The International Classification of Diseases* (World Health Organization) as of January 1, 1981, or as the Commissioner may further define such term by rule and regulation.



Areas of Opportunity - Collaborative

- convene employers, insurers, providers and consumers
- conduct public education about how to submit complaints
- utilize national Parity Registry: <https://www.parityregistry.org/>
- address stigma



Expanding Telehealth Services

- **improved access to telehealth services has been critical** for ensuring Georgians' access to behavioral health care
- has improved access to care in rural areas, places with provider shortages, and for those who struggle with transportation
- action has been taken by federal and state governments to loosen restrictions on reimbursement by Medicaid and Medicare
- Georgia's Department of Insurance issued a directive asking insurers to work with providers to meet increased demand, while also ensuring compliance with Georgia law (O.C.G.A. § 33-24-56.4) requiring parity in reimbursement for telehealth services



Provider Perspective

“Due to everyone working together to quickly respond and provide flexibility with telehealth, there has not been a single day that we could not provide services to those in need.”

-Marnie Braswell, CSB of Middle Georgia



Areas of Opportunity - Telehealth

- urge Georgia's Congressional delegation to extend the temporary federal rules
- Governor, state departments and legislature to **continue to take full advantage of this flexibility**
- **private insurers and Medicaid Care Management Organizations to continue to keep telehealth available with as few reimbursement barriers as possible**



Summary

- Now is the time to count mental wellness as an integral part of overall health
- July is Minority Mental Health Month
- Questions?



Mental illness doesn't discriminate by your background or race, but access to care might.

Stigma, lack of access and poorer quality care, affect mental health care in diverse communities.

Minority Mental Health Month

Learn More at
[NAMI.org/mmh](https://www.nami.org/mmh)

