



DATE: February 27, 2020  
TO: Insurance & Real Estate Committee  
FROM: Ben Shaiken, Manager of Advocacy & Public Policy, The Alliance  
RE: **H.B. 5248** An Act Establishing a Task Force to Study Health Insurance Coverage for Peer Support Services in this State  
**H.B. 5254** An Act Requiring Health Insurance Coverage for Medication-Assisted Treatment for Opioid Use Disorder  
**H.B. 5256** An Act Concerning Required Health Insurance Coverage for Detoxification and Substance Abuse Services  
**H.B. 5247** An Act Concerning Explanations of Benefits

Good evening Senator Lesser, Representative Scanlon, Senator Kelly, Representative Pavalock-D'Amato and members of the Insurance and Real Estate Committee.

My name is Ben Shaiken, Manager of Advocacy & Public Policy at the CT Community Nonprofit Alliance (The Alliance). The Alliance is the statewide association of community nonprofits. Community nonprofits provide essential services in every city and town in Connecticut, serving half a million people in need and employing 117,000 people across the State.

Community nonprofits provide behavioral health services—mental health and substance abuse treatment—to people across Connecticut. They are an important part of what makes Connecticut a great place to live and work and an important piece of our economy.

By their missions and their contracts with the State, they serve all clients and provide them the care they need, regardless of their ability to pay. Many people served by community providers are Medicaid recipients, but many others have commercial insurance, which community providers bill for services.

Thank you for the opportunity to testify on several bills before you today. We ask the Committee to **please support:**

- **H.B. 5248** An Act Establishing a Task Force to Study Health Insurance Coverage for Peer Support Services in this State
- **H.B. 5254** An Act Requiring Health Insurance Coverage for Medication-Assisted Treatment for Opioid Use Disorder
- **H.B. 5247** An Act Concerning Explanations of Benefits

We also have **concerns regarding H.B. 5256** An Act Concerning Required Health Insurance Coverage for Detoxification and Substance Abuse Services.

## **SUPPORT H.B. 5248**

An Act Establishing a Task Force to Study Health Insurance Coverage for Peer Support Services

**The Alliance supports H.B. 5248**, which would establish a task force to study health insurance coverage for peer support services in Connecticut. Peer Support services are recovery-focused services provided by specialists who have experience recovering from mental health or substance abuse conditions. They are a crucial part of behavioral health treatment, and a growing body of **evidence and experience shows that peer support services are effective** at treating mental health conditions and helping people recover from addiction.

**Connecticut does not require commercial insurance companies cover peer support services**, even though they have been proven effective to help people recover from mental health and substance abuse conditions. Connecticut also does not allow peer support services to be billed through Medicaid, even though many other states do.

While this important service should be available to all Connecticut's residences, we acknowledge that there are several outstanding issues, including how to certify Peer Support Specialists, that require more in-depth discussion and analysis. That is why we support H.B. 5248, which would create a task force to determine the best course of action.

We also encourage the Insurance and Real Estate Committee to work with your counterparts on the Human Services Committee, who are considering H.B. 5233 An Act Concerning Payments to Private Providers. Section 2 of that bill would allow Peer Support Specialists to bill Medicaid. **We encourage the Committee to include Medicaid in the task force that H.B. 5248 would create.**

## **SUPPORT H.B. 5254**

An Act Requiring Health Insurance Coverage for Medication-Assisted Treatment for Opioid Use Disorder

**The Alliance supports H.B. 5254**, which would prevent insurance companies from using prior authorizations or step therapy for Medication Assisted Treatment (MAT). MAT uses FDA-approved medications to treat Opioid Use Disorder. There are three drugs that are FDA-approved: Methadone, Buprenorphine (commonly known as Suboxone) and Naltrexone (commonly known as Vivitrol).

In study after study, MAT is shown to reduce illicit opioid use and improve retention in opioid treatment. Simply put: **MAT saves lives in Connecticut every single day.**

The three different medications act and are administered differently. In most cases, Methadone is dispensed at a clinic every day, while Buprenorphine and Naltrexone are prescribed by a doctor or APRN and can be long-acting injectable medications. Many providers of substance abuse services offer all three medications, and people in recovery should have the ability to choose which medication is right for them.

As you are sadly aware, **opioid overdose deaths in Connecticut increased 20%** in 2019. Now is the time to expand access to treatment, as H.B. 5254 would do. Because the three medications are so different, and because access to them can mean the difference between life and death, they should not be subject to prior authorization or step therapy.

In addition, the Departments of Mental Health and Addiction Services and Children and Families both provide limited grant funding, which has been cut significantly in recent years, to cover the cost of care to people who are uninsured or under-insured. In some cases, the State is footing the bill to pay through grants for treatment that should be covered by insurance. If more commercial insurance plans paid for the behavioral health services their customers need, the more this grant funding could be used to pay for people experiencing real gaps in coverage.

### **CONCERNS REGARDING H.B. 5256**

An Act Concerning Required Health Insurance Coverage for Detoxification and Substance Abuse Services

H.B. 5256 would modify health insurance coverage for detoxification and other substance abuse treatment services. **The Alliance is concerned that as drafted, the bill would place annual and lifetime caps on treatment available to people diagnosed with substance abuse disorders** -- treatment services that are delivered by community nonprofits and others across Connecticut. Currently, state statutes mandate insurance coverage of substance abuse treatment services that are deemed medically necessary. Medical necessity determinations should be made using the professional and clinical judgement of an individual's treatment team, which is not always the case when people seeking treatment try to get that treatment covered by their commercial health insurance provider. This is a problem that should be mitigated by legislation and regulation.

**However, we believe the language in H.B. 5256 as drafted could be more restrictive than current statutes.** In particular, we are concerned that Subsections (2) through (6) of both Sections 1 and 2 of the bill would impose annual or lifetime caps on various substance abuse treatment services.

**Recovery is a lifelong process** that requires ample support and tools to the individual seeking treatment. Placing caps and annual limits on treatment options may leave people without the tools and support they need to be successful. Connecticut should ensure that people receive the best care possible without caps and limitations.

### **SUPPORT H.B. 5247**

An Act Concerning Explanations of Benefits

The Alliance supports H.B. 5247, which would allow commercial insurance enrollees the ability to request that mental health and substance abuse services they receive are not shared with the primary beneficiary of their insurance policy through an Explanation of Benefits (EOB). When multiple people in a family are on the same insurance plan, privacy of care is an unfortunate barrier to many young people seeking behavioral healthcare.

H.B. 5247 would require that enrollees who are otherwise legally authorized to consent to their own health care be allowed to request that certain information not be disclosed to the primary beneficiary of their health insurance plan on an EOB.

This bill would allow, for example:

- A young person remaining on their parents' insurance until the age of 26 the ability not to disclose to their parents seeking treatment for an opioid addiction from a community nonprofit;

- A person planning to separate or divorce to seek counseling from a Marriage and Family Therapist at a community nonprofit without disclosing that treatment to their spouse.

We know that fear of unwanted disclosure is a major barrier to people seeking behavioral health treatment. **We ask the Committee to support H.B. 5247.**

Thank you for your time and consideration of these important issues.

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