

TESTIMONY OF CONNECTICUT HOSPITAL ASSOCIATION SUBMITTED TO THE INSURANCE AND REAL ESTATE COMMITTEE TUESDAY, MARCH 15, 2016

SB 372, An Act Concerning Clinical Review Criteria For Utilization Review And Adverse Determination Notices

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning SB 372, An Act Concerning Clinical Review Criteria For Utilization Review And Adverse Determination Notices. CHA supports the bill.

Before commenting on the bill, it's important to point out that Connecticut hospitals provide core healthcare services to all of the people in Connecticut, 24 hours a day, regardless of ability to pay. Connecticut hospitals offer safe, accessible, equitable, affordable, patient-centered care that protects and improves peoples' lives.

CHA supports measures to improve behavioral healthcare for children and adults. Historically, health insurance coverage for mental illness has been less generous than that for physical illness. Mental health parity is a response to this disparity in insurance coverage, and stands for the concept that health insurance coverage for mental health services should be offered on par with covered medical and surgical benefits. Current law prohibits insurance companies from engaging in discriminatory activities with psychiatric and/or substance abuse disorders by requiring plans to provide this coverage in the same manner that they provide coverage for medical conditions such as diabetes or coronary artery disease.

The bill proposes to (1) specify certain clinical review criteria health carriers may use for utilization review for the treatment of a substance use disorder or the treatment of a child, adolescent, or adult mental disorder, (2) require health carriers to post clinical review criteria on their Internet web sites, and (3) require that an adverse determination notice include a reference to the specific rule, guideline, protocol, or other criterion the health carrier relied upon to make the adverse determination.

This bill is consistent with the spirit and practice of mental health parity in that it will allow patients and providers to better understand the rules to be followed by health carriers in

making utilization management decisions for behavioral healthcare services. Increasing transparency with regard to the clinical review criteria in the manner specified by this bill will help ensure that patients get information about the reasons for an adverse determination in a timely manner. Making available clinical review criteria for utilization review will further our knowledge about practices and best practices for the majority of behavioral health and substance use diagnoses, and enable Connecticut citizens to access insurance coverage for mental health and substance abuse treatment services more efficiently.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.