

ASSOCIATION FOR BEHAVIORAL HEALTHCARE

March 30, 2018

Dr. Stuart Altman, Chair Board of Directors Massachusetts Health Policy Commission 50 Milk Street, 8th Floor Boston, MA 02109

Dear Dr. Altman and Members of the Board:

The Association for Behavioral Healthcare (ABH) is a statewide association representing more than eighty community-based mental health and addiction treatment provider organizations. Our members are the primary providers of publicly-funded behavioral healthcare services in the Commonwealth, serving approximately 81,000 Massachusetts residents daily, 1.5 million residents annually, and employing over 46,500 people. Thank you for the opportunity to submit written testimony on the potential modification of the health care cost growth benchmark for this fiscal year.

ABH supports the Health Policy Commission's efforts and those of other stakeholders to slow the growth in overall health care spending. It is important, however, that policy makers and payers recognize the importance of behavioral health treatment in improving the quality of health care in the Commonwealth but also as being critical to controlling spiraling medical costs.

As you know, the opioid epidemic continues to ravage communities across the Commonwealth. There was a 475% increase in opioid related deaths from 2000 to 2016 and 1,977 individuals died in Massachusetts just last year.

SAMHSA reports that almost 50% of adolescents aged 12-17 with major depressive disorder did not receive treatment for it in the past year and 46.2 % of adults aged 18 or older with any mental illness did not receive treatment.

ABH is committed to increasing access to mental health and addiction treatment services for individuals across Massachusetts and believes strongly that all health insurance payers, particularly commercial insurers, should be required to cover more diversionary and recovery focused services for individuals with mental health and substance use disorders. Such services are not just essential to better behavioral health care but also to helping the Commonwealth achieve its goal of limiting the rate of growth in overall health care spending.

Too often we hear health insurers use the Commonwealth's cap on overall health care spending as a reason not to invest in community behavioral health services but these statements are short-sighted.

ABH and our members believe increased investments in community behavioral health care services will lead to significant savings on medical spending. Prevalent data shows that the cost of treating

medical conditions for individuals with co-morbid medical and behavioral health diagnoses is often two to three times higher than treating individuals with the same medical conditions who do not have a co-morbid behavioral health condition.

ABH continues to be concerned about the long-term viability of outpatient mental health and addiction services due to the historic and systemic underfunding of these services. Outpatient treatment is the foundation of the community-based delivery system upon which all other services are built. Unfortunately, chronically low rates of reimbursement are negatively impacting access to this service. Over the years, the erosion of behavioral health outpatient rates has forced providers to make the difficult decision to close clinics or reduce access. Consequently, individuals with severe and persistent mental illness do not have access to vital, cost-effective, and medically necessary services.

Any discussion focused on bending the cost curve should note that the health care system does not treat all areas of service equally.

Thank you for your consideration of the issues raised in this letter. I am available at your convenience if you have questions.

Sincerely,

Vicker V. DiGravio III President/CEO