



### **Memorandum in Support**

#### **New York State Executive Budget Proposal, Article VII, Part II, Subpart B Inclusion of designated clinical review criteria for Mental Health Care**

The New York State Council for Community Behavioral Healthcare (“The NYS Council”) vigorously supports the Governor’s proposal to require that utilization review specialists acting on behalf of New York State regulated insurers use clinical review criteria that is evidence-based and that infuses objectivity into the task of making coverage determinations for mental health (MH) care for eligible beneficiaries.

At the present time, NYS law requires insurers to use criteria approved by the Office of Mental Health (OMH) that is based on generally accepted standards of care that have been developed by experts in the field of public health insurance. However, during an initial review of Medical Necessity Criteria conducted by the Office, it found that none of the plans participating in the Medicaid managed care carve in of behavioral health services, were using criteria that met OMH standards for such determinations.

Use of clinically appropriate and nationally recognized clinical review criteria is essential in order to ensure fair and objective determinations. The needs of the individual seeking assistance should be prioritized in this process. Use of one tool will alleviate the administrative burden associated with regulators having to constantly review the criteria used by insurers. Use of one evidence-based, peer reviewed tool that aligns with generally accepted standards of care should be the norm rather than the exception. New Yorkers with mental health conditions deserve standardization in this process.

While numerous states across the country have passed laws requiring the use of standardized, peer-reviewed tools, it should also be noted that New York State already requires use of a designated criteria for utilization review and level of care determinations for SUD care. This requirement became law in 2017 with the passage of numerous insurance protections that have benefitted New Yorkers with SUD conditions without placing undue burden on insurers.

For these reasons, we urge the legislature to include the requirement in the FY 2024 executive budget proposal, for plans to use state designated clinical review criteria for mental health care determinations, without exception and effective immediately.

For more information, please contact Lauri Cole, Executive Director, NYS Council for Community Behavioral Healthcare