

**New York State Council for Community Behavioral Healthcare
Families Together in New York State
Citizens' Committee for Children of New York
Legal Action Center
Community Healthcare Association of NYS (CHCANYS)
Mental Health Association in New York State
New York State Psychiatric Association
Alliance for Rights and Recovery (formerly NYAPRS)
National Alliance on Mental Illness – NYS
NYS Coalition for Children's Behavioral Health
Federation of Mental Health Services
InUnity Alliance
New York State Care Management Coalition
Coalition of Medication-Assisted Providers and Advocates**

SENATE & ASSEMBLY MUST ENSURE EQUITABLE ACCESS TO MENTAL HEALTH AND ADDICTION CARE FOR ALL NEW YORKERS

Include Part AA of Executive HMM Article VII budget bill in One-House Budget Bills

The organizations (listed above) strongly urge Assembly and Senate leaders to ensure the inclusion of a critical executive budget provision in their upcoming one house budget bills that will correct a longstanding problem in which New Yorkers with commercial insurance are often unable to find mental health and/or addiction services through the state's public mental hygiene system (OASAS and OMH Programs). **Part AA of the Executive HMM Article VII budget would require commercial health insurers to pay, at a minimum, the same rate for outpatient mental health and addictions care services as paid by Medicaid.**

For decades, New York State has failed to require commercial insurers to reimburse community-based mental health and addiction providers at the same rate the state requires to be paid for the same service delivered to a Medicaid beneficiary. These agencies cannot afford to contract with commercial insurers at rates that are (on average and based on provider surveys) just 50% of the Medicaid rate for the same service. This has resulted in a serious access to care problem for New Yorkers with commercial insurance.

State Leaders Must Put the Interests of New Yorkers Seeking Mental Health & Addictions Care Before Health Insurance Plan Interests

We have heard that for profit health insurance plans are pushing back on this proposal making false assertions and asking for it to be rejected and/or changed. Plans are trying to re-direct the conversation and make this about a workforce shortage when in reality if providers receive at least the Medicaid rate for commercial care, this will put badly needed resources back into our system of care, allowing us to hire more staff. Another false claim is that the costs associated with providing care to Medicaid members is higher (for the provider) than it is to provide the same care to a commercial beneficiary. This is patently false. **For a provider, all OMH and OASAS services cost the same regardless of the payer.** Providers must pay their staff regardless of the insurance card carried by the insured.

In 2010, New York State felt compelled to mandate a minimum amount Medicaid must pay providers for mental health and addiction services for Medicaid beneficiaries. The state believes this amount is the minimum providers should be reimbursed based on cost analyses. Notably, in most cases it is the same insurance company which is offering the Medicaid and Commercial products to insureds in New York. **There is no reason that these insurers cannot and should not be required to pay the same reimbursement rate for the same services.** In light of New York's ongoing overdose epidemic and escalating suicide rates, the Senate and Assembly must include Part AA in your one house budget bills. The time is now to cure a longstanding access to care issue for New Yorkers with commercial coverage.

For more information, please contact Lauri Cole, Executive Director, NYS Council for Community Behavioral Healthcare at (518) 461-8200.