



## **OPEN LETTER TO GOVERNOR KATHY HOCHUL**

On behalf of the thousands of New Yorkers insured by a NYS regulated commercial health insurance plan, and the OASAS and OMH community-based mental health and substance use disorder agencies who are struggling to serve them, thank you once again for the courageous leadership you demonstrated earlier this year in proposing and enacting a historic new law that requires commercial insurers to reimburse in-network OMH and OASAS community-based providers for these critical services at (a minimum) the same rate that is paid by the Medicaid program for the exact same care.

For over a decade, New Yorkers with commercial insurance have lingered on waiting lists or given up the search for treatment after spending weeks and months trying to locate a community-based agency in their local community that can afford to serve them. With current rates at approximately 30-50% less than the state mandated Medicaid rate, this ties the hands of community-based providers who cannot afford to serve them due to their inability to recruit and retain the workforce needed to meet increased demand for services.

***In the remaining days leading up to the January 1, 2025 effective date of the new commercial rate mandate, we urge you to hold firm and reject any requests by insurers for a delay of implementation of Part AA – the new commercial rate mandate in the Article VII Health/Mental Hygiene section of the 2024-2025 enacted budget.***

The State and community-based providers have spent significant time and resources preparing for implementation of the law. The Department of Financial Services (DFS), OMH, and OASAS have issued two Frequently Asked Questions (FAQ) guidance documents that respond to questions from impacted stakeholders. In addition, earlier this year the State hosted a Webinar in which it answered a multitude of questions and provided further technical assistance to the field (including health plans). The Offices have provided impacted health plans with a wealth of specific information to make it easy for them to implement the new law on January 1 as required by statute. The language of the new law also permits health plans to recover every penny of any expenses incurred as a result of implementation in their annual rate increase applications submitted to DFS each May.

The time for excuses is over. Insurers have had seven months to prepare for the January 1, 2025 implementation of the new law. A delay of even one day would directly impact working New Yorkers and their families who are waiting for care and as you know, delayed care is (effectively) denied care.

We urge you to prioritize the wellbeing of all New Yorkers, and (in this situation) New Yorkers with commercial insurance, over the interests of large corporations that are well resourced and must continue to be required to implement this law beginning on January 1, 2025.

***All New Yorkers deserve the same access to care regardless of the insurance card in their pocket. New York has made history with the enactment of this landmark law. Lives depend on its timely implementation.***