

# MENTAL HEALTH LEGAL ADVISORS COMMITTEE



January 10, 2012

The Honorable Anthony Petruccelli  
Senate Chair, Joint Committee on Financial Services  
State House, Room 424  
Boston, MA 02133

The Honorable Michael A. Costello  
House Chair, Joint Committee on Financial Services  
State House, Room 254  
Boston, MA 02133

Dear Senator Petruccelli and Representative Costello:

Thank you for this opportunity to provide testimony on the critical issue of ensuring continuity of care for individuals engaged in a continuing course of mental health treatment. **Mental Health Legal Advisors Committee and Health Care For All urge you to support H. 1177, An Act relative to the continuity of care of mental health treatment.** This bill would ensure that persons whose providers leave a particular insurer's network may continue to receive the mental health treatment they need from those providers.

Continuity of care provisions are intended to protect patients from disruptions in care caused by a change in their health care plan or in a provider's network status. Care is disrupted when the therapeutic relationship between a patient and her or his provider is terminated. Such termination may occur when a provider leaves a carrier's network either voluntarily or involuntarily, or when a patient switches health plans voluntarily or involuntarily through job termination, and the new health plan does not include the patient's existing provider in its network.

Employees may face limited insurance options when employers change carriers in order to minimize the employer contribution to health care coverage costs. Contract disputes between health plans and providers may also result in disruption of care, when providers drop out of plans' networks, or threaten to, or when health plans unexpectedly drop providers. The recent contract dispute between Tufts Medical Center and Blue Cross Blue Shield of MA is a perfect example of when disagreements unrelated to quality of care can lead to network instability. When a provider leaves a plan network, patients may suddenly face the choice of forming a new relationship with a network provider, or paying higher out-of-pocket costs to continue seeing their usual providers on an out-of-network

basis. These choices are especially difficult for patients who have long-standing relationships with particular caregivers or those receiving care for serious or chronic conditions. Furthermore, individuals may need to switch plans when they can no longer afford increasing premiums and other costs, and the new plan may not contract with the original provider. These disruptions in care can have extremely detrimental effects on a mental health patient's condition and progress.

Continuity of care for mental health services is an essential part of treatment and the recovery process. Mental health treatment cannot easily be picked up mid-episode of care and continued with another provider. The unique role of the establishment of trust for confidentiality and the creation of the therapeutic relationship makes it clinically unwise and overly costly to force patients who are in the middle of treatment to begin again with a new provider. Continuity of care provisions are therefore critical in order to ensure maintenance of the therapeutic relationship that promotes mental health recovery and wellness.

Attached is further research compiled to demonstrate the clinical rationale behind including protections for mental health treatment in continuity of care provisions, and the need for amendments to the existing continuity of care law. The research further outlines the more generous continuity of care provisions in other states and addresses arguments that such provisions would raise costs for insurers.

As Massachusetts law contains no adequate provisions for continued coverage for patients in a continuing course of mental health treatment, Mental Health Legal Advisors Committee and Health Care For All urge you to report out H. 1177 favorably. Patients rely on the coverage assurances of their health plan and on the ongoing medical care of their chosen mental health care providers and should not be subjected to a loss of such services and treatment. Thank you for your time and consideration on the important issue of ensuring continuity of care for mental health treatment.

Sincerely,

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Mental Health Legal Advisors Committee

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Health Care For All

Cc: Members, Joint Committee on Financial Services