

ASSOCIATION FOR BEHAVIORAL HEALTHCARE

October 17, 2023

Senator Cindy F. Friedman, Chair Joint Committee on Health Care Financing State House – Room 313 Boston, MA 02133

Representative John J. Lawn, Jr., Chair Joint Committee on Health Care Financing State House – Room 236 Boston, MA 02133

Re: Association for Behavioral Healthcare Testimony in Support of S. 760, An Act relative to behavioral health clinic rates

Dear Chairs Friedman, Lawn, and Honorable Committee Members:

As you may know, the Association for Behavioral Healthcare (ABH) represents 81 community-based mental health and substance use disorder treatment and provider organizations and are the Commonwealth's primary providers of community behavioral health services. Three-quarters of our members operate Department of Public Health-licensed mental health clinics. Seventy percent of our members health insurance-based revenue comes from Medicaid and Medicaid health plans. Our members are deeply committed to MassHealth members and individuals with commercial health coverage.

Local mental health clinics provide critical access to therapy and medication for children and adults, but there are thousands of people waiting for care. If clinics were fairly resourced, they could recruit clinicians and expand access to affordable mental health care. **S. 760, An Act relative to behavioral health clinic rates**, would require MassHealth to immediately and permanently raise reimbursement rates for all outpatient mental health services. **ABH strongly supports this bill**.

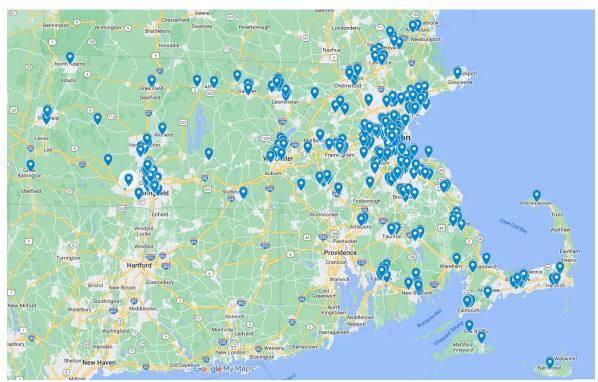
Overview

Mental health clinics offer psychotherapy and medication management for psychiatric illnesses such as anxiety and depression close to home and outside of a hospital. These services are often called outpatient services. Adults and children can get in-person and telehealth outpatient services from mental health clinics.

Clinics are also primary training locations for future therapists who go on to work in schools, hospitals and other community locations. Many therapists and psychiatrists working outside of clinics do not accept insurance. Community mental health centers, a special kind of clinic that

¹ House companion bill, H. 2006, An Act Relative to Applied Behavioral Health Clinics, was assigned to the Joint Committee on Mental Health, Substance Use and Recovery.

contracts with MassHealth, are important places where people with health insurance, including MassHealth (Medicaid), can get care from professionals who accept insurance.



Department of Public Health-Licensed Mental Health Clinics as of June 2023

However, community mental health centers are in trouble. Decades of underfunding have left clinics without enough staff, resulting in long waitlists for care. ABH's 2022 Outpatient Mental Health Access report showed an average wait time of 15.3 weeks for children to access ongoing therapy, and 13,797 adults and children waiting for services. ²

The Commonwealth has made *great strides* with new Community Behavioral Health Centers. But these 26 Community Behavioral Health Centers alone cannot replenish the mental health workforce and offer care to everyone in Massachusetts who needs mental health support.

The Issue

All outpatient services are underfunded. Many mental health providers decline to take insurance because of poor reimbursement rates, making their services available only to those who can afford to pay out of pocket. Community mental health centers serve insured individuals. These centers operate under a rigorous regulatory structure that is important for quality and access. However, the reimbursement structure does not reflect these rigorous regulations, and they are paid the same rate as providers in less-regulated settings.

Mental health clinics are the engine behind the behavioral health workforce. ABH recently asked our members to report on their role in the workforce pipeline. Twenty-three ABH member

²ABH Outpatient Mental Health Access and Workforce Crisis Issue Brief, https://www.abhmass.org/newsroom/abh-in-the-news/2411-outpatient.html.

organization reported training 1,584 therapists to licensure and supervising and training another 802 interns between 2019 and September 2023.

Despite these recent contributions to workforce development, we remain alarmed by data showing that the existing workforce is leaving clinic settings. ABH's 2022 Issue Brief documented that for every 10 master's-prepared clinicians hired, approximately 13 master's-prepared clinicians left their positions. We are concerned that if MassHealth and other insurance plans do not invest in community mental health centers, it will be harder to access care today and it will be harder to access care in the future.

The chart below outlines the state's regulatory requirements for clinics operating as mental health centers and compares them to solo and group practices that operate under less stringent regulatory requirements.

Mandated Staffing, Service, Care Management Requirements	Mental Health Center	Solo and Group Practices Social Worker & Psychologist
Psychiatrist	Yes	No
Psychologist	Yes	Psychologists only
Social Work	Yes	Social workers only
Psychiatric Nurse	Yes	No
Administrator	Yes	No
Director of Clinical Services	Yes	No
Psychiatrist Medical Director	Yes	No
Diagnostic evaluation	Yes	No
Diagnostic evaluation – CANS	Yes	No
Treatment planning	Yes	No
Case consultation	Yes	No
Family consultation	Yes	No
Individual therapy	Yes	No
Group therapy	Yes	No
Couple/family therapy	Yes	No
Pharmacotherapy services	Yes	No
Crisis intervention services (24/7)	Yes	No
Referral services w/ written policy	Yes	No
Coordination with medical care	Yes	No
40 hours/wk operation	Yes	No
Staffed after hours coverage	Yes	No

The Solution

These regulatory requirements ensure expertise from numerous disciplines, access to a vital array of services including medication, care coordination and emergency help. The requirements also have significant costs. Yet payment rates for services are the same in regulated clinic settings as they are in less regulated practice settings. It is time that the Commonwealth invest fairly in clinics as part of a long-term strategy to end waitlists and expand the workforce.

ABH respectfully requests that S. 760 be given a favorable report.

Sincerely,

Lydia D. Conley President/CEO