

4/8/23

Senator Donna Bailey
Representative Anne Perry
Committee on Health Coverage, Insurance and Financial Services
State House
Augusta ME 04332

Re: LD 1304 Resolve, to Establish the Task Force to Study Barriers to Achieving Behavioral Health Integration and Parity

Dear Representative Perry and Senator Bailey, and Representatives Brennan, Dhalac, and Madigan:

As a licensed psychologist in Maine, I am writing in support of this critical emergency legislation to establish a task force to study service barriers to behavioral health treatment. At a time when there is a serious shortage of mental health providers across the state, on the heels of a national pandemic, we have an unprecedented shortage of BH services for every sector of the population, from school children to the elderly.

Over the last few years, I have noted several barriers in my ability to access and meet with clients. One of the largest has been insurance companies changing software, coding, and billing procedures without warning. When errors on their end have resulted in weeks of benefits returned as incorrect or unbillable, they have refused to take action or even admit responsibility until our state agencies have had to get involved. Not only that, they have provided little in the way for us to be able to reach out to them, with phone calls and emails not being returned or contact information unavailable. As of April, I have one insurance company that has created new sub-plans without alerting me and automatically adding me onto them, as they are supposed to do. Despite my office manager spending hours reaching out to them, being on hold, and writing emails in order to rectify this issue, this company has yet to return any of our efforts at outreach. This makes it difficult for me to keep seeing clients for which I stand little likelihood for being reimbursed. Not only that, they are not responding to clients reaching out as well.

In addition, there are other barriers, such as having to spend a few hours each month dealing with review/authorization paperwork that MaineCare requires us to fill out. Yet, despite parity with behavioral and physical health, only behavioral health providers are required to fill out this paperwork for each client. This is especially onerous when my specialty, working with LGBT+ clients, involves a population that has a greater use of MaineCare due to societal pressures and discrimination.

We have also had to contend with the rise of health-care apps that mine our contact information (often incorrectly) off of the internet, and create fake profiles on their websites or app portals. These fake listings show us as unavailable in an effort to funnel clients their own direction. Despite the companies

being threatened with lawsuits in regard to this practice, they have yet to take down the information or correct their approach. Clients are lured to these apps which their insurance often won't cover and often provided by therapists who are not covered for out-of-state behavioral health work.

I am asking for your support to develop this task force to identify the barriers that private and public insurance providers place on BH treatment services. Only by understanding these roadblocks in our insurance system can we improve access, encourage integration with primary care, and streamline our state's ability to provide BH treatment to people of all ages.

Respectfully submitted,

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