



California Coalition for Whole Health

June 29, 2012

Peter Lee, Executive Director
Diana Dooley, Chair
California Health Benefit Exchange
1500 Capitol Avenue
Sacramento, CA 95814

SUBJECT: Invitation to Provide Public Comment – Service Center Options

The California Coalition for Whole Health (CCWH) is a diverse group of behavioral health stakeholders concerned with informing the implementation of the Patient Protection and Affordable Care Act (ACA) to appropriately address mental health and substance use disorder treatment needs. The California Coalition for Whole Health took root in the national Coalition for Whole Health, a group of over a hundred organizations in the mental health and addictions fields from across the nation with shared interest in ensuring appropriate inclusion of behavioral health issues in ACA implementation activities. CCWH hopes to serve as an important resource to the California Health Benefit Exchange board and staff as it moves forward in implementing the Service Center and ensuring California consumers, including those with mental health and substance use disorder treatment needs, receive the essential assistance necessary to help navigate the complex health coverage market and programs.

Foremost, CCWH strongly encourages the Service Center design to ensure that staff members are sufficiently knowledgeable about mental health and substance use disorder parity and equity laws as they apply to qualified health plans, and the scope of mental health and substance use benefits typically available to consumers by qualified health plans and public coverage options. CCWH has noted that too often consumers are misinformed about their mental health and substance use benefits, which can hinder them from accessing necessary service in a timely manner. Lack of timely access to appropriate, mental health and substance use disorder services can cause conditions to worsen and lead to costly emergency and inpatient care. It must be noted that the management and provision of mental health and substance use disorder services in today's small group and individual market varies significantly by health plan and insurance carrier. Many health plans and insurance carriers choose to "carve out" these benefits to partner behavioral health organizations. While this structure should, in theory, be seamless to the beneficiary, more often than not it can leave consumers confused and misinformed – and with services uncoordinated. It will be important for certified navigators and direct benefit assisters to understand this structure in order to appropriately inform consumers about how to navigate this potential complexity, and to ensure their appropriate access to covered benefits.

California's mental health and substance use disorder community has been monitoring issues of consumer access and parity compliance for years. There has been a number of consumer resources developed – some in partnership with the relevant regulatory bodies – to help consumers better understand their rights related to accessing necessary mental health and

substance use disorder services. CCWH would very much like to work with the California Health Benefits Exchange to leverage existing resources to support the development and design of the Service Center.

Specifically, CCWH urges the Exchange Board to consider the following as part of any Service Center design option selected:

- 1) There must be active outreach and enrollment engagement of individuals with mental health and substance use disorder treatment needs. Outreach and engagement activities should be provided in a variety of forums, including web-based, by phone, email, in-person and possibly even through social media.
- 2) Service center activities must take into consideration the unique needs of mental health and substance use disorder clients. Activities and services provided should be based on the recovery principles that are the foundation for California's community mental health system.
- 3) Given the complexity of how mental health and substance use disorder services are sometimes managed by health plans in the private market, Service Center protocols and staff should be well versed in these nuances in order to ensure seamless linkages to appropriate and needed care for individuals with mental health and substance use disorder treatment needs.
- 4) Service center staff should be specifically trained to accurately respond to questions related to mental health and substance use disorder benefits, particularly as they must be provided at parity.
- 5) There should be a conflict resolution process specifically for issues and concerns related to mental health and substance use disorder parity compliance.
- 6) Special protocols should be developed and applied for mental health and substance use disorder emergencies, including suicide and substance overdose.

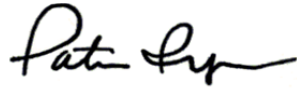
Thank you for your continued commitment to and leadership in the development and implementation of California's health benefits marketplace. We welcome the opportunity to discuss our comments and work collaboratively with the Exchange to further strengthen the Service Center. Specifically, CCWH offers its support to the Exchange board to be a resource in the design and implementation process to ensure that issues related to mental health and substance use disorder coverage are appropriately addressed. CCWH will be convening an internal workgroup of consumer advocates in order to further develop recommendations to inform outreach and enrollment activities, and welcomes the opportunity to share those on an ongoing basis. Any questions may be referred to Renee Verducci, CCWH Coordinator, at ccwh@cimh.org.

Sincerely,

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