



COLORADO ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR COLORADO

4/25/2022

Dear Members of Senate Health and Human Services Committee:

My name is Dr. Lisa Rothgery and I am a family physician in Denver. I am submitting testimony today on behalf of the Colorado Academy of Family Physicians, which represents over 2,500 family physicians, residents and students across our state, in support of House Bill 1302.

As I just noted, I am a family physician. I am both an independent practice owner who has been practicing in the Denver metro area for 17 years as well as the chief medical officer for a Denver based Accountable Care Organization. Both of these roles have given me the opportunity to assess the need for and the impact of integrated behavioral health on our patients, our primary care providers and our healthcare system as a whole.

My practice had the opportunity to participate in the first SIM behavioral health program. The funding from that program allowed us to integrate an LPC into our practice. The impact was immediate. Our patients were no longer subject to months long waits or insurance coverage barriers to care. They were seen by our LPC within days or sometimes even within minutes of identification of their care needs. Not only were we able to address their behavioral health needs at the time when they needed it most, but we were also able to easily track symptom improvement through repeated symptom screening at every visit. In addition, we were able to track an almost immediate drop in our behavioral health related ER and hospital utilization. At the same time, our patient satisfaction numbers skyrocketed. I'll provide you one example, of many similar examples.

Patient A had been seeing me for several years. During that time she had been struggling with depression, anxiety and obesity. Shortly after hiring our LPC, the patient confided to me that she felt most of these conditions stemmed from her spouse's alcohol use disorder and the emotional and physical abuse that came along with it. I connected her with our therapist at that office visit and that day she began a journey of healing. Over the last 2 years she has been able to remove herself and her children from an unsafe home environment. She has lost 30lbs and started a new business. Her depression and anxiety symptoms have resolved. She credits all of this to her ability to find the care and support she needed in an environment in which she had already felt safe. She is but one of many patients in my practice who have been able to combat their chronic and behavioral health conditions with the support of an integrated primary care behavioral health model.

When I meet with the payors in my ACO role, it is clear that the impact of the pandemic has been to significantly exacerbate our state's already under served behavioral healthcare needs. Our network's ER and hospital admissions are led by behavioral health, substance use and alcohol use disorders. Ranking well above heart attacks, COVID, and lung disease. We are living



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in a behavioral health crisis. According to the Harvard Business Review, in 2016 1 in 5 adults reported a mental illness and 71% reported stress symptoms. As of 2021, 90% of adults reported mental health Impacts due to the pandemic. We have seen a 10-20+% increase in antidepressant prescriptions and more than 40% of people report using or abusing alcohol while working. It has been estimated that we may see more than 75,000 deaths of despair from substance use and suicide.

In order to address this crisis, we need a sustainable and integrated behavioral healthcare model that supports our patients at the point of care where they most often interact with our healthcare system - our primary care practices. House Bill 1302 will bring the funding and the training we need to our primary care practices so that we may build that sustainable behavioral health management system.

Thank you for your time and your consideration.
Sincerely,

Lisa Rothgery, MD
Denver, CO