

Senate Health & Human Services
 02/15/2024 01:30 PM
 SB24-093 Continuity of Health-Care Coverage Change
 Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Andrew Rose Amend himself	<p>Dear Senate Health and Human Services Committee,</p> <p>Please support an amendment to SB24-093 Continuity of Care so that mental health is included. When our clients lose coverage, and then pay premiums for a new health plan, we are often excluded from continuing to provide care, because of narrow commercial insurance networks.</p> <p>In one case, our client was disenrolled from Medicaid and then purchased insurance through Optum, only to find he was unable to see his therapist, because Optum would not provide a contract.</p> <p>When terminally ill, pregnant people, people with scheduled surgeries, and people in inpatient treatment are privileged with access to insurance, while people suffering from life threatening depression and disabling PTSD are not offered the same benefit, the MHPAEA Parity laws are violated, and this should be avoided.</p> <p>Please vote yes for the amendment to help Colorado comply with federal and state MHPAEA Parity laws, and to preserve the important therapeutic relationship between the client and their counselor.</p> <p>In regards,</p>
Felicidad Fraser-Solak Amend Grace in Balance and COMBINE	<p>Dear Senate Health and Human Services Committee,</p> <p>Please support an amendment to SB24-093 Continuity of Care so that mental health is included. When our clients lose coverage, and then pay premiums for a new health plan, we, the individual providers and small practices, are often excluded from continuing to provide care, because of narrow commercial insurance networks.</p> <p>From the 2023 Mental Health America report, The State of Mental Health in America, "With a growing demand for mental health services, a shortage of mental health providers, and an increase in out-of-network participation, the system is built such that only people with higher incomes can afford to receive care."</p> <p>From the 2023 Mental Health America report, The State of Mental Health in America, Colorado ranked #2 for the prevalence of untreated youths with depression, ranked #22 for the prevalence of youth with severe major depressive episodes, and 41 with youth with insurance that did not cover mental or emotional problems. I work primarily with the</p>

	<p>youths of Colorado. I can give statistics for a theoretical framework for prevention, outreach, and access to care until the cows come home; my intent is not to devalue their usefulness or demean those who have taken the time to collect and process the data. However, the statistics lose all value when there is a young client in front of me in their darkest moments, looking for support, and I must tell them I can no longer see them because their insurance changed and I am not in-network, or they have been disenrolled. The effect is devastating and compounding their despair.</p> <p>When terminally ill, pregnant people, people with scheduled surgeries, and people in inpatient treatment are privileged with access to insurance, while people suffering from life-threatening depression and disabling PTSD are not offered the same benefit, the MHPAEA Parity laws are violated, and this should be avoided.</p> <p>The assumption that mental health is included in this bill is noble, but still an assumption, and must be explicit. Please vote yes for the amendment to help Colorado comply with federal and state MHPAEA Parity laws, and to preserve the important therapeutic relationship between the client and their mental health therapist/provider.</p> <p>With respect and in solidarity,</p> <p>Felicidad Fraser-Solak, LCSW</p>
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Senate Health and Human Services Committee

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PLEASE SIGN THIS LIST ONLY IF YOU WISH TO TESTIFY.

Bill: SB 24-093
Date: 02/15/24

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Position on Bill:	For	Against
	Neutral	Questions only

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	Neutral	Questions only

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