

## Rosenberg Corey

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**From:** Marc Andrews <rmarcandrews@mac.com>  
**Sent:** Monday, March 13, 2017 12:34 PM  
**To:** SHS Exhibits  
**Subject:** SB 860

### SB 860

Dear Chair Greenlick and members of the House Health Care Committee,

My name is Marc Andrews. I'm a licensed clinical social worker and have been in private practice for over 25 years. I am in support of SB 860. I want to thank Chair Greenlick and members of Health Care Committee for holding this hearing.

Insurers in Oregon have cut reimbursement rates for non-psychiatrist mental health professionals in private practice. As a result, it is increasingly difficult for talk therapy professionals such as social workers, counselors, and psychologists to retain viable private practices, and the mental health private practice sector is entering into a crisis of low supply and high demand. As Board member of the National Association of Social Workers (NASW), I strongly believe there is little clinical or economic justification for this situation. Non-psychiatrist mental health professionals play a key role in sustaining economically feasible mental healthcare for a wide and growing range of clientele in Oregon. Thus, we offer a legislative solution that not only insulates current rates for psychiatric care but, of utmost importance, serves to benefit individuals and families needing greater access to talk therapy. Keeping the door of private practice open to talk therapy professionals through insurance pay parity increases access to affordable and necessary services for populations in need. We ask you to consider the following:

#### Pay Parity Makes Economic Sense

In 2011, health insurers in Oregon outlaid \$221 million on psychiatric medication. The primary treatment offered by psychiatrists is medication prescription and management, provided in 15-minute medication management sessions. This might appear to contrast favorably to the 50-minute sessions that talk therapy professionals provide, however, that efficiency is undermined by the vast medication expenses that it entails.

#### Talk Therapy is a Proven Cost Saver and is Economically Viable

Exhaustive psychotherapy outcome research indicates that most talk therapy clients achieve their goals within approximately six treatment sessions. In contrast, psychiatric pharmaceuticals (for example many top-selling anti-depressants) often require many weeks to take effect. In other words, talk therapy is often successfully completed where medication-based treatment, and adjustments to dosage, can continue for months or years. The comparatively brief treatment duration of talk therapy saves on monetary cost and carries a high potential to save emotional costs to clients.

#### Oregonians Need Greater Access to All Professionals Offering Talk Therapy

Exhaustive reviews of the scientific literature indicate that medication does not secure better results than talk therapy and in some cases has been shown to be inferior. This appears to be the case for both prevalent prescriptions, such as anti-depressants, and anti-psychotics as well. Furthermore, there are many problems and challenges for which there is no prescription; medication is targeted at

specific symptoms and diagnoses, whereas life "in-environment" is often much more complex. Talk therapy attends to the personal and family issues underneath the symptoms and is a treatment for choice of these myriad cases.

Psychiatrists and psychiatric medication are crucial and necessary in mental healthcare. Our concern is that the contribution of talk therapy professionals, though just as crucial, has been unduly undermined by imbalanced insurer reimbursement rates. Mental health is a critical issue for Oregon. Pay parity would both retain existing private practices and encourage therapists to open new ones, assuring wider access to proven and affordable mental health care at a time when such care is both sorely needed and widely called for.

## References

Budnick, N. (2011, June 13). Provision to curb psychiatric drug costs for Oregon Health Plan dies in Salem. The Oregonian. Retrieved from [http://www.oregonlive.com/health/index.ssf/2011/06/provision\\_to\\_curb\\_drug\\_costs\\_f.html](http://www.oregonlive.com/health/index.ssf/2011/06/provision_to_curb_drug_costs_f.html)

Duncan, B. L., Miller, S. D., & Sparks, J. A. (2004). The Heroic Client: A Revolutionary Way to Improve Effectiveness Through Client Directed, Outcome Informed Therapy. Second Edition. San Francisco, CA: Jossey-Bass.

Sparks, J. A., Duncan, B. L., Cohen, D., & Antonuccio, D. O. (2010). Psychiatric drugs and common factors: An evaluation of risks and benefits for clinical practice. In Duncan, B. L., Miller, S. D., Wampold, B. E., and Hubble, M. A. (Eds.), The heart and soul of change: Delivering what works in therapy (pp. 199-236). Second Edition. Washington, DC: American Psychological Assoc.

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