



O R E G O N  
INDEPENDENT MENTAL  
HEALTH PROFESSIONALS

To: Senate Committee on Health Care

From: J. Patrick Mooney, Ph.D.  
Oregon Independent Mental Health Professionals (OIMHP)

Date: April 2, 2025

Re: Support for SB 824 (Amendment 1)

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I am a licensed psychologist and have worked both as an employee of a large multi-disciplined primary health care clinic and as a private clinical practitioner in Salem. Altogether, I have worked in the mental health field for over 35 years, practicing psychotherapy and conducting psychological evaluations. In 2013, I became part of the founding group of Oregon Independent Mental Health Professionals (OIMHP) dedicated to preserving independent private practice in Oregon for all licensed mental health professionals.

In 2017, OIMHP surveyed a sample of 721 Oregon mental health therapists and discovered that almost 50% had left at least one commercial insurance provider network; another 50% were planning to do so in the future. Therapists reported they were leaving provider networks because of inadequate reimbursement and/or excessive insurer oversight and restriction of their services.

With this in mind, OIMHP wrote the legislative concept, which became SB 860. SB 860 tasked the Department of Consumer and Business Services (DCBS) with researching whether commercial insurance companies were reimbursing mental health providers and conducting utilization reviews of their services in a manner equivalent to how they reimbursed and managed medical/surgical providers' services. SB 860 was necessary because this information was either not visible or was not readily available to allow DCBS to effectively monitor whether insurers' practices were in compliance with State and federal mental health parity laws.

In 2021, OIMHP, as part of a large coalition of mental health agencies and provider groups, supported the passage of HB 3046. This bill built upon the initial findings of DCBS's SB 860 research and sought to refine data gathering tools to improve specificity about how behavioral health and medical providers were being reimbursed and how their services were being managed. DCBS has released three annual reports since HB 3046 passed, specifically identifying how behavioral health providers have been paid less than medical providers in terms of both real dollar amounts and as a percentage of Medicare baseline rates for each region in Oregon.

There has been a large upside for mental health services in Oregon due to the passage of HB 3046. Although I don't believe DCBS has directly imposed penalties upon insurers for their parity violations, the specificity of the reporting requirements has made these violations obvious. In turn, insurers have voluntarily adjusted their payment procedures, so now most medical and behavioral health providers are being paid using the same methodology. This has resulted in a reimbursement increase for mental health professionals and most likely has kept more of them working within insurance companies' provider networks. This has been a major benefit for Oregon consumers with mental health conditions, who weren't being adequately served.

Senate Bill 824, Amendment 1 extends some of the most important insurance company reporting requirements of HB 3046, which officially sunset January 1, 2025. Without these reporting requirements in place, insurers' reimbursement and management practices, which have a direct impact upon the willingness of behavioral health providers to work within insurance networks, will once again go dark.

I ask this Senate Committee to please pass SB 824 (-1), which contains insurer reporting requirements, which have already proven effective in the past, and hold the promise of increasing the availability of needed mental health services for Oregonians. With the increased demand for mental health services in the aftermath of the Covid 19 epidemic, these services are needed now more than ever.