



Western Oregon

MENTAL HEALTH ALLIANCE

W O M H A

April 3, 2025

Re: Support for Senate Bill 824 with the -1 amendment

Dear Chair Patterson, Vice-Chair Hayden, and Members of the Senate Committee on Health Care,

My name is Melissa Todd and I am an independently practicing psychologist in Eugene. I am also board president of the Western Oregon Mental Health Alliance (WOMHA); a volunteer-run, non-profit association of multidisciplinary behavioral health professionals who provide in-network care to patients throughout Oregon. WOMHA supports OIMHP, a legislative advocacy committee dedicated to strengthening mental health parity and access to behavioral health care in Oregon. OIMHP was part of the coalition that co-authored and advocated for HB 3046 (2021), the groundbreaking mental health parity law that solidified Oregon as a leader in state-based efforts to facilitate equitable access to behavioral health care. On behalf of WOMHA, **I respectfully ask for your support of SB 824 with the -1 amendment to restore the HB 3046 behavioral health parity reporting requirements that sunset on January 1st, 2025.**

Prior to HB 3046, reimbursement rates for behavioral health providers were low and stagnant for years, even decades. Some insurers had actually decreased reimbursement rates for behavioral health providers. It is well known that stagnant, low, and decreasing reimbursement rates are associated with inadequate networks of behavioral health providers, and this trend was evident across Oregon. As a result, Oregonians had to pay more for out-of-network care or had to forego care altogether because paying out-of-pocket was unaffordable.

After the passage of HB 3046, behavioral health saw unprecedented reimbursement increases beginning in 2022 as insurers changed their reimbursement practices to come into compliance with the law. The annual Behavioral Health Parity reports required by HB 3046 provided DCBS with the needed data to monitor compliance and insurers with the needed accountability to maintain compliance. On January 1st, 2025 certain HB 3046 reporting requirements ended including:

- In-network versus out-of-network utilization of behavioral health and medical/surgical services; an important measure of network adequacy.
- Reimbursement rate metrics for office visits across all behavioral health and medical/surgical provider types; disparate reimbursement trends are a sign of parity non-compliance.
- Denials, appeals, and percentage of denials upheld for behavioral health and medical/surgical services; denials have historically been used by insurers as a cost containment strategy.

The HB 3046 reporting requirements have been a remarkably effective strategy to facilitate change in insurance company policies and practices *without the need for formal state intervention*: A DCBS spokesperson told ProPublica in 2024 “that there have been no investigations or enforcement actions in response to the new [reporting] requirements.” Yet measurable change has occurred, including:

- Insurers aligning behavioral health reimbursement policies with medical/surgical policies.
- Multiple increases in network reimbursement rates by multiple insurers for behavioral health services since 2022.
- Increasing consumer utilization of in-network behavioral health services over time according to the DCBS Behavioral Health Parity Reports (2022, 2023, 2024); a measure of improved network adequacy and access to care.

SB 824 with the -1 amendment restores these important reporting requirements with no modifications. Requiring insurers to submit this information is facilitating change that supports Oregon’s behavioral health workforce and benefits consumers of behavioral health care. Insurers are already accustomed to gathering and submitting this data. DCBS has found the data useful and honed their reporting methods to depict meaningful perspectives and trends. The publicly available Behavioral Health Parity Reports shine a light on insurer practices that drive or restrict access to behavioral health care; *consumers and their advocates deserve transparency and access to information that explains how “the system” works.*

On behalf of WOMHA and the behavioral health professionals who are our members, I respectfully ask for your support of SB 824 with the -1 amendment. **Our members are in network with health insurance companies and believe that consumers should be able to use their benefits to access behavioral health care at the same level as physical health care.** Please restore the HB 3046 reporting requirements to support our efforts to achieve true behavioral health parity in Oregon. Thank you for considering our perspective on this important legislation.

Respectfully,



Melissa Todd, Ph.D.

Licensed Psychologist

Board President/OIMHP

Western Oregon Mental Health Alliance (WOMHA)