

# Mental Health Parity & Access Update

## Item 9A – Group Insurance Board

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# Informational Item Only

- No Board action is required

# Recap of Options from February 2021

**Provider network  
adequacy  
requirements**

**Telehealth**

**Promoting mental  
health first aid  
(MHFA) training**

**Analyzing parity  
requirements**

**ETF  
communications on  
benefits available &  
stigma reduction**

**Health plan  
communications on  
mental health  
services**

**Access to peer  
support workers**

**Adding marriage &  
family therapy  
coverage**

# Provider Network Access Requirements

Concept: Add minimum number of behavioral health providers to health plan network qualifications

- Similar to primary care, hospital, and chiropractor requirements
- Intended to increase access

ETF does not recommend this option

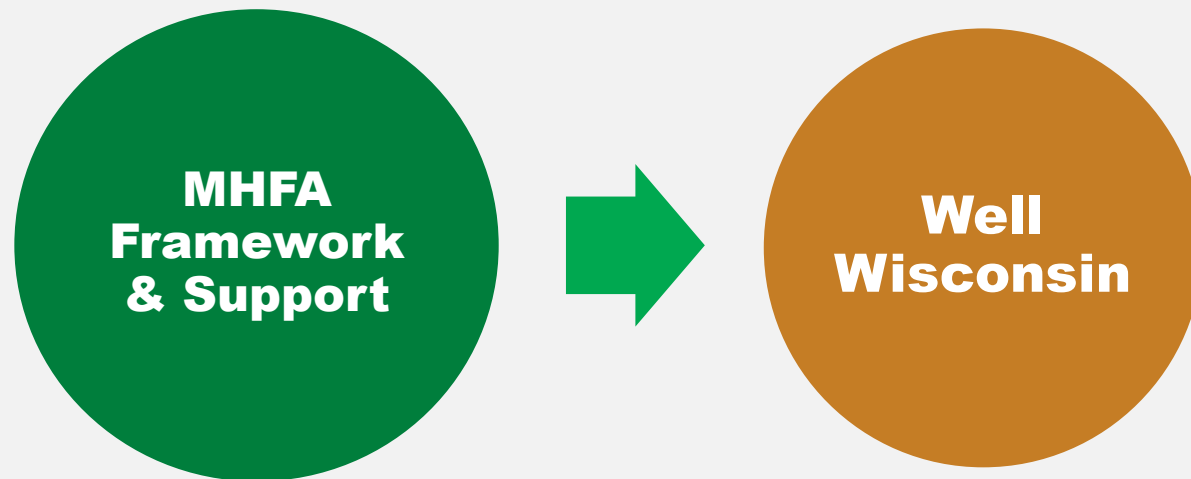
- Plans indicate they meet access standards for quality accreditation
- Issue is provider ability to schedule more than number in network
- Adding minimum number could inadvertently limit plan eligibility in low-access counties

# Telehealth

## Opportunities for continued telehealth improvement

- Guidelines to ensure cost-sharing for tele-behavioral health services is consistent
- Satisfaction surveys for improved telehealth experience

# Promote Mental Health First Aid (MHFA) Training



- Provide skills for lay people to help others address mental health concerns
- MHFA trainings available to ETF staff & supported other employers via wellness grants
- Investigate opportunities to increase uptake of MHFA training, including as part of the Well Wisconsin Program

# Analyze Plan Parity Compliance

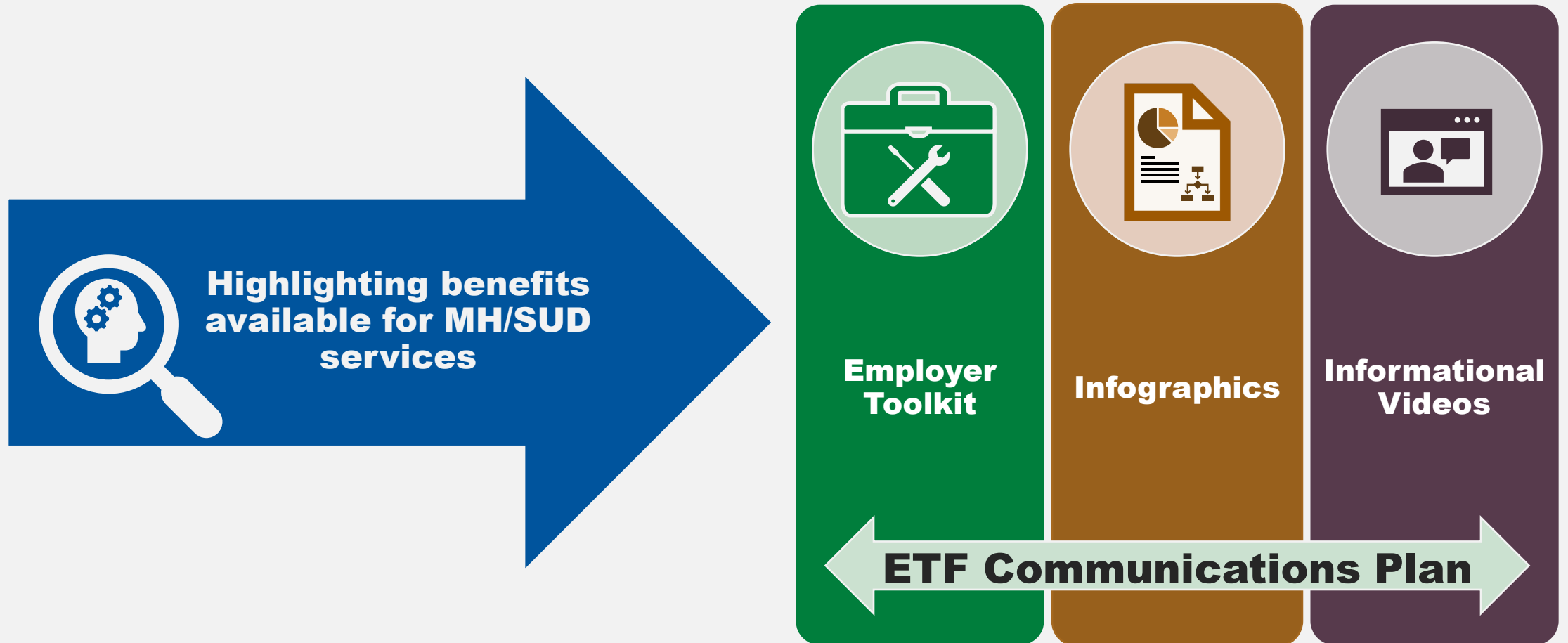
Concept: ensure the Board's program meets Consolidated Appropriations Act requirements

- Using Dept of Labor Self-Compliance tool as reference

Compliance review complete

- The Board may delegate much of reporting to health plans; included in 2022 Program Agreement
- ETF will follow up with health plans to better understand non-quantitative treatment limits and plan analyses

# Develop Communications on Benefits Availability & Stigma Reduction





# Encourage Health Plan Communications Regarding MH/SUD

Strategies that promote mental health education, access, and programming

ETF mental health communication and educational outreach materials

Potential benefit design changes for ETF to consider

Council on Health Program Improvement (CHPI) meetings

# Access to Peer Support Workers

Concept: create access to peer support workers through GHIP

- Non-clinicians with lived experience who help members access and navigate care
- Currently available in Medicaid programs

ETF exploring for future implementation

- Need more time to explore how providers are credentialed and paid
- More information will be shared at May Board meeting

# Coverage of Marriage and/or Family Therapy

**Family therapy and marriage counseling have been shown to assist patients with MH/SUD**

- Maintaining appointments, medication regiment, sustaining sobriety for longer periods of time, and overall health outcomes for the individual

**ETF Recommends**

- Cost-Benefit Analysis
- Engage Segal prior to making any recommendations to the Board

# Next Steps

- Continuing research on two benefit change options
  - Peer support workers
  - Marriage and family therapy
- Developing communications and outreach materials with the help of external stakeholders

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**Questions?**