

Overview: The Mental Health ABC Act: Bill S.3097 now on Governor Baker's Desk

Guaranteeing Annual Mental Health Wellness Exams. A cornerstone of this reform is the idea that a person's mental health is just as important as a person's physical health. This bill would codify this principle by mandating coverage for an annual mental health wellness exam, comparable to an annual physical.

Enforcing Mental Health Parity Laws. This bill provides the state with better tools to implement and enforce parity laws by creating a clear structure for the Division of Insurance to receive and investigate parity complaints and ensure their timely resolution. Other tools include parity enforcement for commercial, state-contracted and student health insurance plans, increased reporting and oversight of insurance carriers' mental health care coverage processes and policies, and reasonable penalties and alternative remedies for when an insurance company does not comply with the law.

Initiatives to Address Emergency Department Boarding. For many people with acute mental health needs, the only place to get help is an emergency department (ED). Unfortunately, these patients may wait days, weeks, and even months for more appropriate admission to an inpatient psychiatric unit or less acute level of care. This is referred to as 'boarding,' which continues to rise dramatically. This legislation tackles this by creating online portals that provide access to real-time data on youth and adults seeking mental health and substance use services and includes a search function that allows health care providers to easily search and find open beds using several criteria; requiring the Health Policy Commission (HPC) to prepare and publish a report every three years on the status of pediatric behavioral health as the youth boarding crisis is particularly acute; requiring the Center for Health Information and Analysis (CHIA) to report on behavioral health needs; updating the expedited psychiatric inpatient admissions (EPIA) protocol and creating an expedited evaluation and stabilization process for patients under 18; codifying in statute the working group tasked with implementing the EPIA in law.

988 Implementation and 911 Expansion. This legislation increases access to immediate behavioral health care through the implementation of the nationwide 988 hotline to access 24/7 suicide prevention and behavioral health crisis services. This legislation also expands 911 to bridge the gap until 988 is implemented by increasing training, funding, and capacity for regional emergency responses to behavioral health crises.

Red Flag Laws and Extreme Risk Protection Orders. This bill initiates a public awareness campaign on the Commonwealth's red flag laws and extreme risk protection orders (ERPOs) that limit access to guns for people at risk of hurting themselves or others.

Reimbursing Mental Health Providers Equitably. Mental health and primary care providers are reimbursed at different rates for the same service. The bill seeks to level the playing field for reimbursement to mental health providers by requiring an equitable rate floor for evaluation and management services that is consistent with primary care.

Reforming Medical Necessity and Prior Authorization Requirements. This bill mandates coverage and eliminates prior authorization for mental health acute treatment and stabilization services for adults and children. It also establishes a special commission to bring all stakeholders to the table to study and make recommendations on the creation of a common set of medical necessity criteria to be used by health care providers and insurance carriers for mental health services.

Creating a Standard Release Form. Behavioral health providers struggle in the era of electronic health records and care coordination to create systems that simultaneously protect an individual's right to consent to share sensitive health information and allow practitioners to access the information they need to treat the individual and coordinate care. This bill directs the development of a standard release form for exchanging confidential mental health and substance use disorder information to facilitate access to treatment by patients with multiple health care providers.

Increasing Access to Emergency Service Programs. Emergency Service Programs (ESPs), which are community-based and recovery-oriented programs that provide behavioral health crisis assessment, intervention, and stabilization services for people with psychiatric illness, are currently covered by MassHealth. The bill would require commercial insurance companies to cover ESPs as well.

Expanding Access to the Evidence-Based Collaborative Care Model. The collaborative care model delivers mental health care in primary care through a team of health care professionals, including the primary care provider, a behavioral health care manager, and a consulting psychiatrist. This evidence-based access to mental health care has proven effective, less costly, and less stigmatizing. The bill would expand access to psychiatric care by requiring the state-contracted and commercial health plans to cover mental health and substance use disorder benefits offered through the psychiatric collaborative care model.

Reviewing the Role of Behavioral Health Managers. Some insurance companies have subcontracted mental health benefits to specialty utilization management companies for years with mixed results. The bill directs the Health Policy Commission, in consultation with the Division of Insurance, to study and provide updated data on the use of contracted mental health benefit managers by insurance carriers, often referred to as 'carve-outs.'

Tracking and Analyzing Behavioral Health Expenditures. This bill includes a critical first steps toward incentivizing greater investments in mental health care within the analysis of statewide health care cost growth. Specifically, the bill directs the Center for Health Information and Analysis (CHIA) to define and collect data on the delivery of mental health services to establish a baseline of current spending.

Establishing an Office of Behavioral Health Promotion. Current behavioral health promotion activities are spread across state agencies. This dilutes the responsibility for mental health promotion and focus on the issues and undermines the important work being done. The bill establishes an Office of Behavioral Health Promotion within the Executive Office of Health and Human Services (EOHHS) to coordinate all state initiatives that promote mental, emotional, and behavioral health and wellness for residents. The new office is tasked with tailoring mental health

messaging and intervention to veterans and first responders. It also creates a student advisory council to guide the office on meeting the mental health needs of the Commonwealth's students.

Increasing Access to Care in Geographically Isolated Areas. This bill directs the Department of Mental Health (DMH) to consider factors that may present barriers to care—such as travel distance and access to transportation—when contracting for services in geographically isolated and rural communities.

Enhancing School-based Behavioral Health Services and Programming. This bill improves the wellness of young people by enhancing school-based behavioral health supports and increasing access points for effective behavioral health treatment by limiting the use of suspension and expulsion in all licensed early education and care programs and creating a statewide program to help schools implement school-based behavioral health services.

Increasing Access Points for Youth for Effective Behavioral Health Treatment. To support treatment accessibility for young people, this bill requires behavioral health assessments and referrals for children entering the foster care system.

Expanding Insurance Coverage for Vulnerable Populations. Critically, this legislation implements a technical fix to ensure individuals over 26 years old who live with disabilities can remain on their parents' health insurance.

Creating a Roadmap on Access to Culturally Competent Care. Under this provision, an interagency health equity team under the Office of Health Equity, working with an advisory council, will make annual recommendations for the next three years to improve access to, and the quality of, culturally competent mental health services. Paired with the Legislature's ARPA investment of \$122 million in the behavioral health workforce through loan repayment assistance programs, this roadmap will make great strides toward building a robust workforce reflective of communities' needs.

Allows for an Interim Licensure for Licensed Mental Health Counselors. The bill creates an interim licensure level for Licensed Mental Health Counselors (LMHCs) so that they can be reimbursed by insurance for their services and be eligible for state and federal grant and loan forgiveness programs, further increasing the number of licensed providers able to serve patients.

Expanding Mental Health Billing. This bill allows clinicians practicing under the supervision of a licensed professional and working towards independent licensure to practice in a clinic setting. This will help to ensure quality training and supervision and encourage clinicians to stay practicing in community-based settings.

Updating the Board of Registration of Social Workers. The bill updates the membership of the Board of Registration of Social Workers to clarify that designees from the Department of Children and Families (DCF) and Department of Public Health (DPH) be licensed social workers.

Re-structuring the Board of Allied Mental Health. The bill re-structures to Allied Board composition to reflect the proportion of license holders in each discipline covered by the Board.