

Testimony and Comments regarding Medicaid 1115 waiver renewal submission to the Centers for Medicare and Medicaid Services to extend the Healthy Indiana Plan.

The implementation of the Affordable Care Act (ACA) is potentially the most significant policy change for persons with mental health and addictive disorders. ACA could expand access to mental health and substance use services to almost everyone in the state. Beginning in 2014, insurance plans will be required to cover mental health and substance use disorder services and will be required to cover them at parity with medical and surgical benefits.

Mental Health treatment has a long and varied history in Indiana that even now limits evidence-based services to those who can afford treatment and the limited number who receive government assistance. For the first time, ACA could provide seamless behavioral health services to those in need, regardless of disease state or ability to pay. For the first time, these services would truly be provided with Parity for all—at the same levels and equal to physical health.

Today, about one-third of those who are currently covered in the individual market have no coverage for substance use disorder services and nearly 20 percent have no coverage for mental health services, including outpatient therapy visits and inpatient crisis intervention and stabilization.

The United States Supreme Court left open the question as to whether or not everyone will be covered. Indiana has the opportunity to expand access to health care—and more specifically mental health and substance use treatment. This access is critical to persons with mental illness and substance use disorders, as the prevalence of mental illness and substance use disorders in this population is significant nationally--and even greater in Indiana.

The prevalence of Serious Mental Illness among adults ages 18-64 eligible for current Medicaid is almost 12% nationally. According to SAMSHA, it is almost twice that much in Indiana at almost 24%. Similarly, the SMI prevalence in the Medicaid Expansion population is 7% nationally and over twice that at 15% in Indiana. The prevalence of substance use disorders eligible for Medicaid in Indiana is comparable nationally at over 12%, but in the Expansion population, again the national prevalence is just over 14% while in Indiana it is 24%.

Indiana must take advantage of the opportunity to provide access to healthcare to the over 350,000 Hoosiers that fall within the Expansion population. The proposal to use the Healthy Indiana Plan (HIP) as the model for expansion is a valid approach that we support. Mental Health America of Indiana was a leader originally in pushing for the

legislation that created HIP, as it includes provisions for Mental Health and Substance Abuse benefits at Parity with medical and surgical benefits as provided by ACA.

A significant number of Hoosiers who require mental health and substance use treatment will not be able to receive it without HIP coverage. Indiana must provide access and coverage for all Hoosiers who require mental health and substance use treatment. Mental Health America of Indiana supports HIP as that vehicle.

Respectfully Submitted,

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