

February 2, 2022

The Honorable Steven Johnson

Chair, Kansas House Committee on Insurance and Pensions

Re: Opposition Testimony on SB 199

Dear Chairman Johnson and Members of the Committee,

My name is Ryan Reza, I am the Public Policy and Advocacy Director for NAMI Kansas, the Kansas National Alliance on Mental Illness, and I am here today to strongly urge you to oppose SB 199.

NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care; however, this bill does the opposite. For Kansans with mental health conditions, having accessible, affordable, and comprehensive health insurance is critical for getting the mental health care they need. SB 199 expands the availability of low-quality short-term, limited duration (STLD) health plans; the opposite of what Kansans need.

Short-term plans undermine coverage for mental health and substance use treatment. Under federal law, most health insurance plans that are offered by employers or purchased by individuals must cover mental health and substance use care at parity with other benefits. However, short-term plans are within the exception to this law. Presently, short-term plans are not subject to parity rules, nor are they required to provide essential health benefits. In fact, coverage of mental health and substance use services within short-term plans is either nonexistent or woefully inadequate. Undermining coverage for mental health and substance use treatment has the potential to put thousands of Kansans in danger, specifically some of our most at-risk.

Furthermore, **coverage of mental health and substance use disorder treatment is insufficient in short-term plans.** According to Mental Health America's 2018 report, one in five adults – more than 40 million Americans, have a mental health condition. Twenty-one million have a substance use disorder, and 7 million have both a mental health and substance use condition. Looking at statistics from KDADs, from 2012-2016 we had almost 130 thousand Kansans partake in a Community Mental Health program each year, making mental health coverage and treatment an essential issue in Kansas. The Kaiser Family Foundation found that on average, 57% of short-term health insurance plans sold on the most common platforms do not cover mental health, and 38% do not cover treatment for substance use.

Finally, short-term plans provide insufficient coverage for people at risk of suicide. In the 2019 Substance Abuse and Mental Health Services Administration behavioral health report on Kansas, it found

that almost 8% of young Kansans aged 18-25 and 4.6% of adults aged over 25 suffer from serious thoughts of suicide, a sizeable population throughout the state and one that we have to protect. Based on stated coverage by the 7 largest short-term health insurance plan providers, not one covers treatment for a suicide attempt. Passage of this bill puts those Kansans at risk of never receiving coverage for a treatment they need to survive, putting their lives at risk and the health of their loved ones as well.

I want to thank the members of the Committee for your consideration of this testimony. NAMI KS remains a dedicated advocate for Kansans living with mental health conditions across the state and will remain steadfast in opposition of SB199. If you have any questions, I'd be happy to answer them now or through my email provided.

Sincerely,

Ryan Reza

NAMI KS Policy & Advocacy Director

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