

January 28, 2021

Senator Jeb Bradley Senate Health and Human Services Committee 107 North Main Street Concord, New Hampshire 03301

Dear Chairman Bradley and Committee Members,

My name is Kenneth Norton, and I am the Executive Director of NAMI NH, the National Alliance on Mental Illness. I am a Licensed Independent Clinical Social Worker (LICSW) in the State of New Hampshire with extensive experience working in community mental health. I have served as a subject matter expert in the areas of mental health as well as suicide prevention for the US Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Defense (DOD) and the Veterans Administration (VA). Closer to home I have served on numerous legislative committees. On behalf of NAMI NH, I am here to offer our strong support for SB 59 relative to the collaborative care service delivery model.

A holdover from the days of asylums for treating people with mental illness is a segregated model of care where people with mental health conditions as well as substance misuse and addiction are most often seen completely separately from their primary care providers who are responsible for their overall health. In recent years, there has been a significant amount of research and evidence regarding improved outcomes for patients when their care is integrated. However, in practice information between mental health/substance use and health care treatment provider systems is rarely if ever exchanged. This is reinforced by regulations such as the Health Insurance Portability and Accountability Act (HIPAA) and the confidentiality provisions for substance use treatment under Federal Rule 42 CFR.

Insurance reimbursement and billing codes also present significant barriers to the provision of segregated care by typically not allowing billing for "additional" services such as seeing a therapist/clinician on the same day or in the same office as a primary care provider. But more importantly, they do not allow reimbursement for care coordination activities which promote integrated care and improved patient outcomes. In the long run, improved outcomes will likely result in overall health care cost savings as well. It would not be over dramatic to state that improved outcomes may be lifesaving as I have personally heard from primary care providers, after a suicide death, that had they been more aware of their patient's acute mental health condition they may have been able to intercede and save their life.

I would like to thank Senator Sherman for sponsoring this important bill. This is clearly the direction that health care needs to move, and this is an important step in the right direction. On behalf of NAMI NH, I strongly urge you to vote SB 59 as ought to pass.

I am happy to answer any questions committee members have.

Respectfully,

Kenneth Norton, LICS Executive Director