



January 25, 2023

Honorable Chair Regina Birdsell  
Senate Health and Human Services Committee  
Legislate Office Building Room 101  
North Main St., Concord, NH 03301

RE: NAMI NH Support for SB 85

Dear Chair Birdsell and Committee Members:

Thank you for the opportunity to testify today. My name is Holly Stevens, and I am the Director of Public Policy at NAMI New Hampshire, the National Alliance on Mental Illness. NAMI NH is a non-profit, grassroots organization whose mission is to improve the lives of all people impacted by mental illness and suicide through support, education and advocacy. On behalf of NAMI NH, I am here today to speak in favor of SB 85, relative to emergency behavioral health services and behavioral health crisis programs.

It's no secret that New Hampshire is in the midst of a mental health crisis. Suicide is the second leading cause of death for individuals ages 10-34, the third leading cause for individuals ages 35-44, and the fourth leading cause for individuals ages 45-54. Last year in the Granite State, 279 lives were lost to suicide and 53,000 adults contemplated suicide. One in five adults in the US experience mental illness each year and 221,000 adults in New Hampshire have a mental health condition. Additionally, one in six US youth ages 6-17 experience a mental health disorder each year, and 15,000 Granite Staters ages 12-17 have depression. More than half of people with a mental health condition in the US did not receive any treatment last year. In New Hampshire, 92,510 people live in a community that does not have enough mental health professionals.

SB 85 recognizes the importance of creating a sustainable behavioral health crisis stabilization system, setting forth a new definition of a behavioral health crisis program. This definition includes the three pillars of the crisis continuum recommended by the Substance Abuse and Mental Health Services Administration (SAMHSA): someone to call, someone to respond, and some place to go. The someone to call is the 988 crisis phone number or the NH Rapid Response Access Point, the someone to respond is the mobile crisis team at each community mental health center, and the someplace to go is a short term crisis stabilization unit. The goal of the overarching crisis system is to reduce the need for individuals to go to the emergency room during a mental health or substance use disorder crisis.

In addition to setting forth the framework for a crisis stabilization system, and in keeping with parity requirements, this bill prohibits insurance companies from requiring a prior authorization for short-term behavioral health crisis intervention and stabilization services, short-term behavioral health intensive in home services, and short-term behavioral health residential treatment services. Insurance companies can only require prior authorization if they have a

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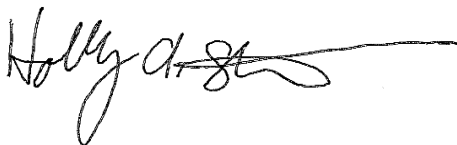
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medical clinician or licensed mental health provider available on a 24-hour hotline to make the medical necessity determination and assist with approval, coordination, and placement of the patient at the appropriate level of care.

SB 85 also creates a commission to explore ways to sustainably fund the crisis system. Currently, the 988 call centers are being funded with COVID relief dollars, which will fund the call centers through 2024. It is vital that New Hampshire design a sustainable funding system to assist with the mental health crisis.

SB 85 goes a long way in addressing the current mental health crisis by defining a crisis system; requiring parity between physical health and behavioral health emergency care; and establishing a commission to assure New Hampshire's crisis system is sustainable. For these reasons, NAMI NH urges the committee to recommend SB 85 ought to pass. I am available to answer any questions the committee may have.

Sincerely,

A handwritten signature in black ink, appearing to read "Holly A. Stevens". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Holly A, Stevens, Esq.

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