



FOR IMMEDIATE RELEASE  
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## Maryland Among Worst States for Access to Affordable In-Network Services for Mental Health and Substance Use Disorder Treatment

*Maryland Advocates Join National Campaign to Enforce Non-Discrimination  
Insurance Requirements*

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(Annapolis, Md.) According to an independent report by Milliman, Inc., Maryland residents are struggling to access affordable behavioral health (mental health and substance use disorder) treatment under their private insurance plans. The nationwide study found that Maryland residents are much more likely to rely on out-of-network services for behavioral health treatment compared to other medical and surgical services, despite federal legislation designed to prevent such an occurrence.

The lack of in-network treatment options force Maryland residents that depend on behavioral health treatment to utilize more expensive out-of-network services, thus undermining efforts to provide access to affordable treatment for thousands of vulnerable Marylanders.

"Maryland is in the midst of an opioid epidemic with increased demand for behavioral health services," said Linda Raines, CEO of Mental Health Association of Maryland. "At the same time, Marylanders face some of the worst insurance disparities in the nation when it comes to accessing the care they need to treat mental health and substance use disorders. We need to reverse this trend and commit to giving vulnerable Marylanders better access to critically important behavioral health treatment."

The [Milliman study](#) looked at three years of insurer claims data from 2013 to 2015, covering approximately 42 million Americans in all 50 states and Washington, D.C. The data demonstrated that insurers in Maryland are much more likely to provide in-network care for medical and surgical services compared to behavioral health services, limiting access to care and forcing residents to pay more for care they do receive. Among the study's key findings:

- ? In national rankings, Maryland was the **third worst state** in terms of the utilization of out-of-network **office visits** for behavioral health care. The proportion of out-of-network behavioral health care **office visits** was **9.5 times greater** than that of primary care out-of-network utilization in 2015.
- ? When it comes to **inpatient** behavioral health treatment, individuals in Maryland were **7 times** more likely to utilize out-of-network facilities compared to those accessing medical/surgical care in 2015.
- ? The proportion of **outpatient** behavioral health facility care delivered out-of-network use was **3.5 times greater** than that of medical/surgical facility out-of-network utilization in 2015.

These findings come close to the tenth anniversary of the passage of the federal Mental Health Parity and Addiction Equity Act that prohibits discriminatory insurance coverage for those with mental health and substance use disorders. Advocates say the Parity Act must be effectively enforced in order to achieve its objective of expanding access to critically needed behavioral health treatment. But advocates say that in the 10 years since its enactment, enforcement of the law has been lacking, leaving thousands of Marylanders at risk.

The Mental Health Association of Maryland and several other consumer health advocacy groups, are joining together as part of the [Parity@10 Compliance Campaign](#), a collaboration between national and state advocates to establish effective models for robust enforcement of the Parity Act in 10 states and to disseminate those models across the country.

"Although Maryland has taken important steps to improve access to mental health and substance use disorder treatment, we clearly have a long way to go to ensuring that the parity law is enforced" said Ellen Weber, Vice President for Health Initiatives at the Legal Action Center and Director of the Parity@10 Campaign. "If policymakers want to reverse the devastating impact of the opioid crisis, we must ensure that insurers are complying with the federal parity law before they are permitted to sell plans in Maryland."

The Mental Health Association of Maryland will be presenting the findings from the Milliman Report to the Maryland House of Delegates Insurance Subcommittee on Tuesday, January 30, 2018. The Legal Action Center will present testimony and make policy recommendations regarding Parity Act enforcement to address ongoing disparities in coverage for mental health and substance use disorders.

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**The Mental Health Association of Maryland (MHAMD)** is the state's only volunteer, nonprofit citizen's organization that brings together consumers, families, professionals, advocates and concerned citizens for unified action in all aspects of mental health and mental illness. [www.mhamd.org](http://www.mhamd.org)

Established in 1973, the [Legal Action Center](#) is the only non-profit law and policy organization in the United States whose sole mission is to fight discrimination against people with histories of addiction, HIV/AIDS, or criminal records, and to advocate for sound public policies in these areas. [www.lac.org](http://www.lac.org)

**Parity@10** is a three-year campaign to establish effective models for robust enforcement of the Parity Act in 10 states and to disseminate those models across the country. The campaign's goal is to ensure that insurance carriers and State Medicaid programs offer fully parity compliant substance use and mental health benefits and put an end to a complaint-driven enforcement model that forces consumers to fight for the evidence-based health care they need and are entitled to receive. The campaign is being spearheaded by the [Legal Action Center \(LAC\)](#), [The Kennedy Forum](#), [The National Center on Addiction and Substance Abuse](#), [Partnership for Drug-Free Kids](#) and the [Research & Evaluation Group at Public Health Management Corporation](#)