

Testimony Before the New York State Joint Legislative Hearing on Mental Hygiene on the 2022 Proposed Executive Budget February 14, 2022

The Community Service Society of New York (CSS) would like to thank the Chairs and members of the Senate and Assembly Mental Health Committees, Alcoholism and Substance Abuse Committees, and Finance Committees for the opportunity to comment on the proposed 2022 Executive Budget. CSS has worked with and for New Yorkers since 1843 to promote economic opportunity and champion an equitable city and state. We power change through a strategic combination of research, services, and advocacy to make New York more livable for people facing economic insecurity. By expanding access to health care, affordable housing, employment, opportunities for individuals with conviction histories, debt assistance, and more, we make a tangible difference in the lives of millions.

In March 2018, Section 33.27 of the New York State Mental Hygiene Law was enacted to establish the independent statewide ombudsman program, also known as the Community Health Access to Addiction and Mental Healthcare Project (CHAMP). CHAMP is designed to help consumers and providers with health insurance coverage for substance use disorder and mental health services and is overseen by the New York Office of Addiction Services and Supports (OASAS), in consultation with the New York Office of Mental Health (OMH).

OASAS contracts with CSS to administer CHAMP and provide services to clients through a live-answer helpline and a network of non-profit organizations. CSS operates CHAMP in partnership with the Legal Action Center, the New York State Council for Community Behavioral Healthcare, and the Medicare Rights Center. Five community-based organizations also provide CHAMP services around New York State. This testimony is submitted on behalf of CSS, not on behalf of OASAS, OMH or our other CHAMP partners.

CHAMP's mission is to help New Yorkers overcome insurance barriers and get the substance use disorder and mental health care they need—and have the right to receive. With both overdose and mental health crises currently causing untold suffering to New Yorkers, CHAMP's services are needed now more than ever. **CSS thanks Governor Hochul for increasing CHAMP's funding this year to \$3 million and asks that the Legislature maintain this increase in its own budget proposals.**

Since CHAMP launched in October 2018, it has handled 4,207 cases on behalf of consumers and providers needing help with health insurance for substance use disorder and mental health care. CHAMP has served clients in 58 of New York's 62 counties. CHAMP helps New Yorkers of all ages, incomes, races, and ethnicities, and serves clients regardless of insurance status. The most common reason people contact CHAMP is because they need help accessing treatment, and the most common barrier they face is insurer denials. CHAMP provides a wide range of services to our clients, from information and informal advocacy to filing appeals and regulatory complaints. In 86% of the cases where CHAMP knows the final resolution of the case, CHAMP was able to get clients the result they were looking for. To date, CHAMP has reached over 300,000 stakeholders through outreach and education.

Since launching in 2018, the need for more resources for CHAMP has become increasingly clear. CHAMP's first contract year was nine month long, with a budget of \$1.5 million. Subsequent contract years were 12 months long, but funding remained the same, effectively resulting in a 25 percent funding cut to the program. CHAMP's clients are extremely vulnerable, and their needs are typically complex; as a result, CHAMP provides more intensive services than initially envisioned. For example: CHAMP clients typically go out-of-network for services more often than clients seeking medical/surgical services; CHAMP appeals are typically three times longer than medical/surgical appeals; client medical records that CHAMP must review are often lifelong, running may hundreds or even thousands of pages; parity analyses and complaints are complex and time-consuming; and clients seeking substance use and mental health care are often in crisis, requiring a very quick turnaround in services. Furthermore, CHAMP's number will begin appearing on all Medicaid notices of adverse determination this year, likely resulting in an influx of clients. CHAMP therefore needs more client-facing staff. In addition, full program staffing especially if the program is expanded – should include a Quality Assurance and Training Manager and an Administrative Specialist, both of which CHAMP currently lacks.

With current funding, CHAMP has five community-based organizations (CBOs) in its network that serve clients on the ground in 24 counties. In CHAMP's first contract year, CBOs had 6-month-long contracts. When funding remained level in CHAMP's subsequent contract years, in which CBOs had 12-month-long contracts, the CBOs effectively experienced a 50 percent funding cut. CHAMP aims to increase funding for its current CBOs and add additional CBOs, providing on-the-ground services to more clients across New York.

With a \$3 million budget, CHAMP will scale up to help even more New Yorkers access life-saving care. A \$3 million budget will enable CHAMP to add six new CBOs to its network to cover additional counties with on-the-ground local services. A \$3 million budget will also allow CHAMP to increase the budgets of existing and new CBOs so that they can dedicate a full-time staff person to providing CHAMP services. Additionally, CHAMP will

increase funding for the Medicare Rights Center so they can assist more New Yorkers struggling to overcome Medicare barriers to care. With a \$3 million budget, CHAMP will also add helpline staff and hire a Quality Assurance and Training Manager and an Administrative Specialist. Lastly, increased funding will allow CHAMP to create a website.

Increasing CHAMP's budget will allow the program to help more people like Esteban.¹ CHAMP was contacted by Esteban's family after his insurer denied coverage of his residential substance use disorder treatment. Esteban had come to his family for help with an opioid addiction they were unaware of, and they rushed to find him treatment in the midst of the COVID-19 pandemic. Esteban had out-of-network benefits through his employer-sponsored insurance, and his brother helped him get admitted to residential treatment. Although the facility where Esteban received treatment was OASAS-licensed, Esteban's insurer denied coverage because the facility was not licensed by the Joint Commission and the Commission on Accreditation of Rehabilitation Facilities (CARF). However, Esteban's plan contract states it covers residential treatment at facilities "that are licensed, certified or otherwise authorized by OASAS," and contains no requirement that facilities be additionally licensed by the Joint Commission and CARF. CHAMP filed an internal appeal with the plan on Esteban's behalf, but the plan upheld its denial. CHAMP then filed second-level appeal with the plan as well as complaints with the Department of Financial Services and the Office of the Attorney General. In response, the plan agreed to cover Esteban's care.

CSS thanks the Governor and the Legislature for their support of CHAMP and the vulnerable New Yorkers we serve, and asks that the Legislature support Governor Hochul's proposed increase to CHAMP's funding.

¹ Client's name has been changed to protect confidentiality.