National Multiple Sclerosis Society: Testimony in Support of SB 460

Consumer Health Access Program for Mental Health and Addiction Care: Establishment

February 2022

The National Multiple Sclerosis Society writes to express support for HB 517/SB 460, to strengthen access to mental health and substance use services and coverage parity in Maryland. We thank Senator Augustine and Delegate Lewis for bringing forward this important legislation and strongly encourage a favorable report of the bill.

Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and the body. Symptoms vary from person to person and range from numbness and tingling to walking difficulties, fatigue, dizziness, pain, depression, blindness, and paralysis. The progress, severity, and specific symptoms of MS in any one person cannot yet be predicted. The cause is unknown and there is no cure. Most people with MS are diagnosed between the ages of 20 and 50 and it is the leading cause of disability in young adults. While it is much rarer, MS is sometimes diagnosed in children. There are an estimated 1 million Americans living with MS.

In addition to its physical symptoms, MS may have profound impact on an individual's mental health and behavior, as well as the mental health of family members and caregivers. At first, it may be difficult to adjust to the diagnosis of a disorder that is unpredictable, has a fluctuating course, and carries a risk of progressing over time to some level of physical disability. Lack of knowledge about the disease adds to the anxieties commonly experienced by people who are newly diagnosed with MS. In addition to these emotional reactions to the disease, demyelination and damage to nerve fibers in the brain can also result in emotional changes¹.

Aside from the normal stresses of everyday life, MS creates stresses of its own. Many people with MS say they experience more symptoms during stressful times; when the stress lessens, their symptoms seem less severe. Due to the unpredictable nature of MS, just anticipating the next exacerbation can be a significant source of stress. MS can cause significant anxiety, distress, anger and frustration from the moment of its very first symptoms, with anxiety at least as common in MS as depression. Loss of functions and altered life circumstances caused by the disease can be significant causes of distress on the mental health of people living with MS. Due to these impacts, mental health care is considered an essential element of comprehensive MS care.

Despite the demand for mental health services and its critical role in MS care, far too many Marylanders experience unnecessary barriers in accessing mental health care. Racial/ethnic minorities, gender and sexual orientation minorities, and people with disabilities face unique challenges, including inaccessibility of high-quality mental health services and cultural and subcultural stigma around mental health².

Through the establishment of the Consumer Health Access Program for Mental Health and Addiction Care, consumers – including those who are uninsured or have private or public health plans – and

¹ https://www.nationalmssociety.org/Symptoms-Diagnosis/MS-Symptoms/Emotional-Changes

² https://www.psychiatry.org/psychiatrists/cultural-competency/education/mental-health-facts

providers in Maryland would have assistance navigating and resolving issues related to enrollment and coverage; access to mental health and substance use disorder services and enforcement of rights under the Mental Health Parity and Addiction Equity Act, as well as state and federal insurance laws. This program would also assist Marylanders by providing outreach and education to improve health literacy regarding mental health services and coverage. In addition, consumers and providers would have access to a toll-free helpline and an online assistance portal to allow consumers and providers who are acting on their behalf access to the services of the program. The program would also assist and represent consumers in the filings of complaints, grievances, and appeals of coverage decisions.

Additionally, this legislation would take important steps towards identifying trends and gaps in coverage of and access to mental health and substance use disorder services through robust data collection and analysis. The program would be responsible for identifying trends in parity violations and recommending policies and practices to resolve deficiencies in coverage and access to services. In making this data available to the public, government agencies, the Attorney General, and the General Assembly, this program would shine much-needed light on parity compliance issues across the state.

Critically, this legislation would make considerable progress towards promoting health equity in access to mental health and substance use disorder services. This is important for the Society, as research has shown that attitudes regarding mental health care delivery in MS vary according to racial and ethnic background, and a lack of cultural understanding by providers may contribute to underdiagnosis and/or misdiagnosis of mental illness in people from racially and ethnically diverse populations.

By entering into agreements with spoke and specialty entities that are led by and serve Black, Hispanic, Asian, Indigenous disability, and gender diverse communities, this program would help to deliver culturally competent services responsive to the diverse needs of Marylanders impacted by MS. We strongly support language in the bill that would require the program to provide services in multiple languages and through multiple modalities, including in-person, telephone, and internet services, as an important equity measure.

Thank you for your consideration. We respectfully urge the committee to favorably report this bill. If you have any questions regarding the Society's position, please contact Shannon Wood, Director of Advocacy and Policy, at shannon.wood@nmss.org.

Sincerely,

Shannon Wood
Director Advocacy and Policy
National Multiple Sclerosis Society

³ https://www.msard-journal.com/article/S2211-0348(21)00717-3/fulltext

⁴ https://www.psychiatry.org/psychiatrists/cultural-competency/education/mental-health-facts