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Washington, D.C. 20004  
February 21, 2024

Senate Finance Committee  
Maryland General Assembly  
3 East, Miller Senate Office Building  
Annapolis, MD 21401

Via electronic submission

**RE: SUPPORT FOR SB 791**

Dear Chair Peña-Melnyk, Vice-Chair Cullison, and Members of the Committee:

On behalf of Inseparable, I am testifying to urge your support of SB 791, which will improve access to lifesaving mental health and substance use disorder (MH/SUD) treatment. SB 791 will reduce inappropriate denials of care and help ensure that medical necessity determinations are consistent with accepted clinical standards of care.

Inseparable is a national nonprofit focused on closing the treatment gap for people with MH/SUDs, improving crisis response, and supporting prevention and early intervention. We are proud to support SB 791, which is an essential step to addressing Maryland's MH/SUD crisis. We are deeply appreciative of Senator Klausmeier and Delegate Cullison's leadership in bringing together stakeholders – including insurers – to put forward a strong proposal that will reduce barriers to MH/SUD treatment at a time of such overwhelming need.

We strongly support the following critical provisions in SB 791.

**Protect Patients from Life-Threatening Denials of Needed Care**

SB 791 includes essential, common-sense reforms that require insurers to conduct utilization review in a manner consistent with accepted clinical standards of care and using transparent, peer-reviewed nonprofit medical or clinical specialty criteria. More than 30 national organizations including The Kennedy Forum, Inseparable, National Alliance on Mental Illness, Mental Health America, the American Psychiatric Association, American Hospital Association, and the American Academy of Child and Adolescent Psychiatry have strongly endorsed such provisions.<sup>1</sup> These requirements are especially critical in increasing the quality of care by aligning providers and payers around transparent, peer-reviewed clinical criteria and guidelines. Maryland – like a number of other states – already requires that plans use The ASAM Criteria

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<sup>1</sup> See relevant provisions contained in The Kennedy Forum's Jim Ramstad Model State Legislation to Advance Mental Health and Addiction Equity By Requiring Compliance with Generally Accepted Standards of Care, 2021. <https://www.thekennedyforum.org/app/uploads/2021/05/Ramstad-Model-Legislation-May-2021.pdf>.

from the American Society of Addiction Medicine’s Criteria for determining the appropriate level of substance use disorder care.<sup>2</sup> The same should be true for other mental health conditions.

### **Strengthen Patient Rights to Timely Determinations**

SB 791 includes essential – and, again, common-sense – provisions that determinations must be made within specified timeframes. It is particularly important that, for expedited reviews, the insurer must accept the attestation of the treating provider, who is best positioned to know whether delay will endanger the patient or others. Finally, we believe it is critical that, whenever an insurer fails to make a determination within the time limits required by SB 791, the requested care be approved. In states without such consequences, insurers routinely violate the timeframes, leaving patients and their families with little recourse. We strongly support this provision.

### **Increase Transparency on Denials and Data Reporting**

We strongly support SB 791 provisions to increase transparency to patients when they are denied requested services. Too often, we see MH/SUD services denied with few details and little explanation, making it very difficult for individuals and families to understand why care was denied and with inadequate information to fight the denial. We also support strengthened data transparency provisions relating to denials of care. Every insurer should be required to collect and provide information relating to medical necessity denials annually to the Maryland Insurance Administration. Such information can help raise red flags, particularly where high denial rates or overturn rates on appeal can identify inappropriate utilization review practices.

Inseparable respectfully requests that the Committee favorably report this bill.

Thank you for the opportunity to testify.

Respectfully,



David Lloyd  
Chief Policy Officer

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<sup>2</sup> Legal Action Center and Partnership to End Addiction, “Spotlight on Medical Necessity Criteria for Substance Use Disorders, December 2020, <https://www.lac.org/resource/spotlight-on-medical-necessity-criteria-for-substance-use-disorders#:~:text=The%20Spotlight%20recommends%20that%20States,criteria%20for%20medical%20necessity%20determinations.>