

IMPROVE ACCESS TO BEHAVIORAL HEALTHCARE

Mental Health Parity and Addictions Equity Act of 2008

requires that health plans not make it harder to access in-network mental health and substance use disorder benefits than comparable medical/surgical benefits. The RTI report, released April 2024, provides data showing that this is not happening. *

Patients with commercial insurance are often forced to go out of network for behavioral healthcare.

- For treatment in an acute inpatient facility in 2021, specifically, Floridians had to go out-of-network (OON) **24 times more** for behavioral health care than for medical/surgical care.
- For sub-acute inpatient care, it was **58.2 times more**.
- The greatest shortage of physicians is Primary Care Physicians, and still the need for patients to go OON for Primary Care is **far less** than the OON rates for Behavioral Health Care.

*Mark, T. L., & Parish, W. J. (2024). Behavioral health parity – Pervasive disparities in access to in-network care continue. RTI International.

The average in-network reimbursement rates for behavioral health professionals are lower than for medical/surgical physicians.

- There are not enough available behavioral health professionals in the network. One reason is **likely low reimbursement rates**:
 - The overall rates for all medical/surgical providers were **33.8% higher** than for behavioral health clinics.
 - Reimbursement rates for medical/surgical physicians were **33.7% higher** than for psychiatrists.
 - Reimbursement rates for medical/surgical physicians were **30.2% higher** than for psychologists.
 - Reimbursement rates for physician assistants were **37.5% higher** than for therapists.

FOR MORE INFORMATION VISIT:

<https://flmhac.org/behavioral-health-parity>

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