

Playbook: Ensuring People Can Get the Mental Health & Substance Use Disorder Care They Need

State in Focus: Arizona



Advocates and state-level policy makers are developing legislative solutions to protect and care for people with mental health and substance use concerns—ensuring they have equal access to affordable and quality health care.



This United States of Care Playbook aims to highlight elements of a successful effort to enact legislation—including messaging, story-telling, and coalition development—that may be replicable in other communities.

Who needs to hear this?

We hope **state leaders, policymakers, and community partners** will find that this case study:

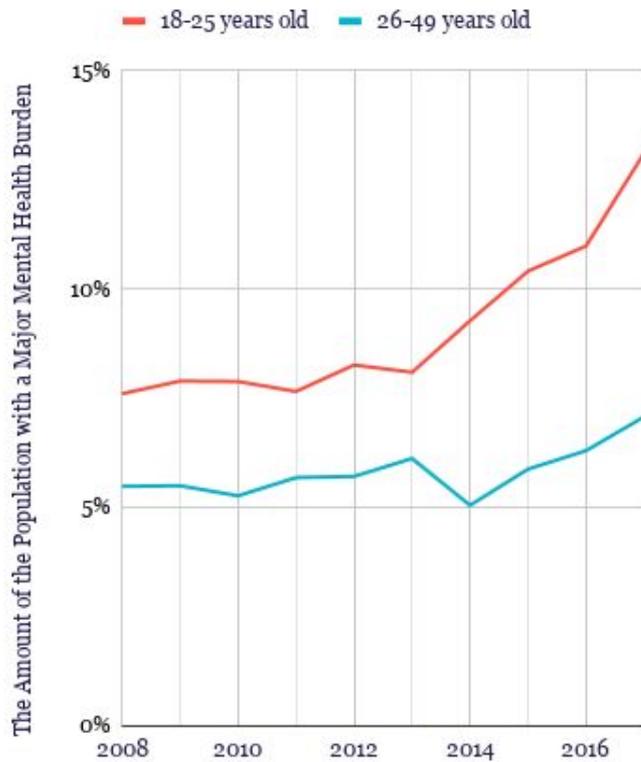
- ★ Explains one approach to identifying and targeting emergent children's mental health care needs;
- ★ Highlights effective partnerships and messaging decisions to pursue and pass parity legislation; and
- ★ Identifies actions to help states respond to the rising mental health crisis in their communities.

Contents

- ★ Defining the Crisis
- ★ Case Study: Arizona
 - Background
 - Policy Structure
 - Pathway to Legislation
- ★ Momentum
- ★ Links & Further Resources
- ★ Appendix

An Ongoing American Crisis

National Trends in Mental Health Burdens



Data from the National Survey on Drug Use and Health via the [American Psychological Association](#)

- ★ **Mental health burdens have long been rising:** Symptoms of depression and anxiety have risen for more than a decade—particularly in [young adults](#).
- ★ **Substance use disorders (SUDs) continue to cause harm** at great expense—costing the nation an estimated [\\$740 million](#) annually—with the greatest toll felt in the brutal loss of life: from 2007 to 2019, [deaths from drug overdoses doubled](#) to over 70,000 people per year.
- ★ **Cost is a major barrier to care:** [11.8 million people](#) went without needed mental health care in 2016; more than a [third](#) of them didn't receive care because they could not afford it.

COVID-19: Rising Concerns

The **COVID-19 pandemic has dramatically exacerbated mental health and SUD burdens**, and heightened the barriers to accessing care across the United States:

- ★ **1 in 10 people** seriously contemplated suicide in mid-summer 2020—a terrifying rate surpassed among at-risk populations, including youth (1 in 4), essential workers (1 in 5), and unpaid caregivers (1 in 3).
- ★ The stress and solitude of the pandemic make those who have received SUD treatment **vulnerable to relapse**—and the comorbidities of SUD **result in worse outcomes** for those who have to manage both.
- ★ Early estimates suggested as many as **27 million workers** and dependents may have lost their job-connected health insurance. The latest models suggest **2.9 million people are newly uninsured** as a result—a serious barrier to health care.

The Essential Step Forward

Parity is at the core of this fight:

- ★ The [Mental Health Parity and Addiction Equity Act](#) (MHPAEA), the major federal parity law passed in 2008, requires insurers to cover mental health and addiction services no more restrictively than illnesses that impact the rest of the body.
- ★ Unfortunately, the MHPAEA has few embedded enforcement mechanisms, and [requires state](#) enforcement; **state laws can and should be enacted to enforce the federal standards set over a decade ago.**

Case Study: Arizona Jake's Law



The Arizona Landscape

- ★ **11.3% of high school students** reported a suicide attempt within the last year—50% higher than the national average.
- ★ **Nearly half of patients** have to look out-of-network to receive mental health treatment, which results in **more expensive care**.
- ★ In **2018**, **58.5% of adults** with mental illness in Arizona did not receive treatment, and **62.1% of children** in Arizona with major depression did not receive mental health services.
- ★ **44% of adults** with a serious mental health illness (defined as a disorder resulting in serious functional impairment) did not receive treatment in 2017 and 2018.

“Insurance companies should be covering mental health care, just like they cover an annual physical. And we’re going to make sure they do.”

– Governor Doug Ducey in the 2020 [State of the State Address](#)

Policy Priorities

What was initially intended to be a tight, targeted effort to improve enforcement of existing consumer protections became a far-reaching mental health omnibus. Weaving together the priorities of a dedicated group of champions, Jake's Law aims to:

- ★ **Save childrens' lives**—especially those who are experiencing serious mental illness or at-risk of death by suicide—both with legislation and with stop-gap measures to offer protections while the law is implemented.
- ★ **Hold the state's health insurers accountable** to the standards set by federal parity law.
- ★ **Make it easier for consumers** to understand their health coverage benefits and billing—and simpler to report infractions and violations.

Breaking Down the Legislation

Jake's Law: Mental Health Omnibus 2020 – AZ [S.B. 1523](#) & [H.B. 2764](#)

★ Improving Insurance Coverage

- Requires plans to cover mental health care at levels comparable to physical care
- Requires insurers to submit detailed analyses every three years demonstrating compliance with federal parity law
- Strengthens the pathways and navigation tools for filing appeals and flagging parity violations
- Establishes a mental health parity advisory committee

★ Building Improved Systems

- Creates a position for an expert in behavioral health at the Department of Insurance
- Mandates the creation and implementation of new hospital discharge protocols for people with substance overdoses or who are at-risk for suicide

Breaking Down the Legislation (cont.)

Jake's Law: Mental Health Omnibus 2020 – AZ [S.B. 1523](#) & [H.B. 2764](#)

★ Investing in Youth Intervention

- Requires insurers to reimburse for care received in schools and other educational settings
- Appropriates funds to support out-of-network school-based mental health services for uninsured and underinsured children referred by their educational institution

★ Reducing Suicide Risk

- Creates a statewide suicide mortality review team with a mix of essential state stakeholders, including insurers, providers, families, and advocates
- Invests in and expands follow-up services for individuals at risk of suicide

“This world is now missing out on my amazing son. My kids are growing up without a brother—all because one person at an insurance company said that he wasn’t at risk for suicide.

Maybe, just maybe, if [Jake’s Law] was in effect when he needed it, my son would be here today.”

– [Angela Gamboa](#), an Arizona mom

(Edited and condensed from her [AZ Senate HHS Committee testimony](#))

Lessons Learned: Effective Messaging

The ultimate goal of campaigning and coalition-building was to make these essential mental health care and SUD treatment reforms:

- ★ **Personal**—by rooting the advocacy efforts in the needs of Arizona families.
- ★ **Clear**—demonstrated by the direct, impactful language used in the Governor’s State of the State Address.
- ★ **Local**—while advocates listened to and used tools from the American Psychiatric Association and the Kennedy Forum, the ultimate legislation created oversight tools and forums that are led by Arizonans.

Lessons Learned: Political Strategy

A few **essential components** ensured the passage of Jake's Law:

- ★ **Leadership from Governor Ducey**
- ★ **Stakeholders brought to the table early in the process**
- ★ **A committed non-partisan effort:** The advocacy coalition, bipartisan bill co-authors, and Governor's team made every effort to maintain the momentum built with the [Mitch Warnock Act](#), which passed with unanimous support in 2019.
- ★ **Focused on youth:** Following the 2018 school shooting in Parkland, Florida, behavioral health for youth became a critical priority; as part of this work, Arizona law has since [co-located behavioral health care](#) in primary and secondary schools, increasing care provided on campuses by 250%.
- ★ **Championed by Arizonans:** In committees and in letters to lawmakers, people shared their stories—ranging from parents' losses and their grief, to the lifesaving care that saddled a young woman with debilitating medical debt, to the mental health care a man received that made it possible for him to thrive.

Lessons Learned: Building The Coalition

Personal stories are powerful, but a key element of success was the hard work of ensuring the right stakeholders were on board. In other states, coalitions have included law enforcement, educators, and the broader health care community (beyond mental health providers).

Led by the JEM Foundation, the **Arizona Coalition for Insurance Parity** included:

- ★ The Arizona Psychiatric Society
- ★ Mental Health America – Arizona
- ★ [MIKID](#)
- ★ Arizona Council of Human Service Providers
- ★ American Foundation for Suicide Prevention – Arizona



Legislative Timeline

- March '19** The JEM Foundation met with Governor Ducey's office to discuss parity legislation, modeled off of existing model language as well as previous state-level parity laws, such as New York's [Timothy's Law](#)
- May '19** Mitch Warnock Act signed into law—a youth suicide prevention effort championed by a coalition of mental health care advocates
- May '19** The JEM Foundation and Carly Fleege met with their ideal sponsor: Senator Kate Brophy McGee (R-28), Chair of the Arizona Senate Health and Human Services Committee, who acted as a trusted leader and connector to stakeholders statewide
- August '19** Governor Ducey's office committed to pursuing mental health parity as a major legislative objective for 2020
- Fall '19** Local advocates and Governor Ducey's office hosted dozens of conversations with policymakers and stakeholders, including insurance companies
- October '19** The decision was made to have mirror bills in both the House and Senate, and to specifically request that the sponsorship be held open (to bring in bipartisan support)
- February '20** Mirror bills introduced, read and passed through the Arizona House and Senate which allowed bill to move more quickly
- March '20** Governor Ducey signs Jake's Law, a mental health care omnibus



Governor Ducey Signs Jake's Law March 3, 2020

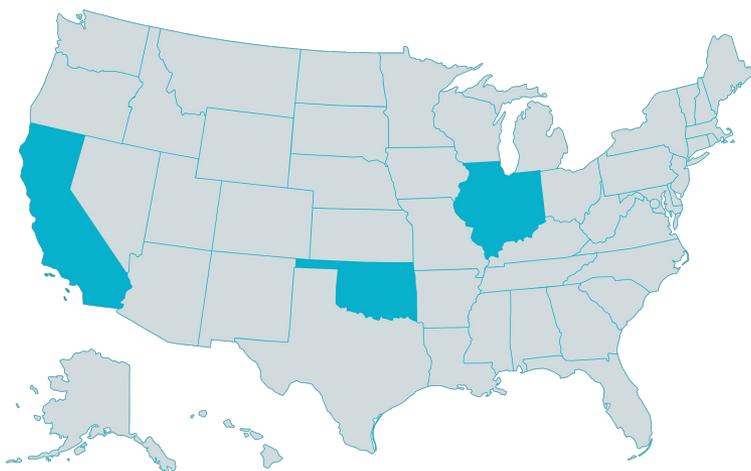
The Path Forward

- ★ **Jake’s Law** (S.B. 1523) was signed by Governor Ducey on [March 3rd, 2020](#) after passing the Arizona legislature **with unanimous support**.
- ★ **Taking Essential Steps:**
 - The [Children’s Behavioral Health Services Fund](#) is operational; while new care and coverage processes are built, AZ has set aside \$8,000,000 from the General Fund for youth mental health services.
 - The Arizona Department of Insurance has set up the Mental Health Parity Advisory Committee, which began meeting in [December 2020](#).
 - The Department of Health Services is creating a Suicide Mortality Review Team to review deaths across the state and provide recommendations for interventions.
 - The Department of Insurance has hired a full time expert in behavioral health to guide implementation.
- ★ **Simplifying Consumer Protection Navigation:** Starting in 2021, all insurance cards for plans regulated by the AZ Department of Insurance will have “AZ DOI” printed on them, as well as the contact information for reporting parity violations and surprise bills over \$1,000.

“Among the many lessons...the most important is that our personal stories and vulnerabilities have the power to change hearts and minds.”

– [Denise Denslow](#), Founder, The JEM Foundation

Improving Access Nationwide



★ State-level efforts

- Every state and D.C. have passed some legislation supporting coverage and access for mental health care and SUD treatment, but a few lead the charge, including: **IL, IN, OK, and CA.**
- In the next couple years, watch for states adopting the Generally Accepted Standards of Care laid out in Wit v. United Behavioral Health.

★ Federal activity to watch

- Efforts are underway to bolster the MHPAEA; one is the Strengthening Behavioral Health Parity Act.

Illinois Leaning In

Essential Elements—Key legislation that became law:

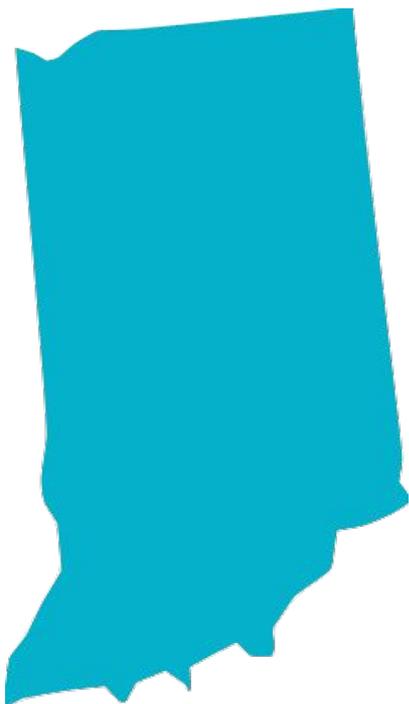


- ★ 2018 [S.B. 1707](#): Strengthened consumer protections through the Department of Insurance, and ensured parity of mental health and SUD care coverage with physical care coverage. Also prohibited coverage exclusions based on location of care—expanding access to school-based care—and prohibited exclusions of court-ordered treatment. Based on a Kennedy Forum model.
- ★ 2019 [S.B. 1449](#): Required health and disability insurers to ensure parity for mental health and SUD conditions. Created a Mental Health Parity Task Force within the DOI to review disability income insurance plans for their behavioral health use and integration, and make recommendations to the Governor’s office before 2021.

Further Information: [IL Parity Tracker](#)

Indiana Moving Forward

Essential Elements—Key legislation that became law:



- ★ 2020 [H.B. 1092](#): Reinforced parity requirements for mental health and SUD coverage and compliance reporting in Medicaid, and built enforcement mechanisms. Rooted in [Kennedy Forum Model Legislation](#).
- ★ 2016 [S.B. 297](#): Improved Medicaid coverage and treatment protocols for substance use disorder, including opioid and alcohol addiction recovery services.
- ★ 2016 [S.B. 165](#): The Healthy Indiana Plan established mental and physical health care parity by requiring mental health and SUD coverage to be no more limited than medical or surgical conditions.

Further Information: [IN Parity Tracker](#)

Oklahoma Making Gains

Essential Elements—Key legislation that became law:

- ★ 2020 [S.B. 1718](#): Established mental health and SUD parity compliance and reporting requirements, as well as enforcement and transparency mechanisms. Also created an insurance premium cap for increases justified by the provision of mental health care and SUD treatment—rooted in a Kennedy Forum model.
- ★ 2010 [S.B. 2054](#): Required insurance plans to include benefits for the treatment of severe mental illness and substance use disorders. Mandated that treatment limitations be no more restrictive than those for medical and surgical benefits.



Further Information: [OK Parity Tracker](#)

California Leading The Way



Essential Elements—Key legislation that became law:

- ★ 2020 [S.B. 855](#): Moving past standard reinforcements of Federal Parity Law, this law is the first to require insurance plans to follow the [Generally Accepted Standards of Care](#) and use non-profit clinical specialty association criteria, rather than internal or commercial criteria.
- ★ 2017 [S.B. 374](#): Brought state parity law into alignment with federal laws.
- ★ 2015 [S.B. 43](#): Reinforced mental health and SUD care as essential health benefits.
- ★ 2013 [S.B. 639](#): Prohibited insurers from creating separate out-of-pocket maximums for behavioral health.

Further Information: [CA Parity Tracker](#), [CHCF Parity Enforcement Review](#)

For more information:

- ★ Check to see how your state measures up with the Kennedy Forum's [State-level Parity Tracker](#) & [Parity Report Cards](#), which grade states based on the existence and strength of their parity statutes.
- ★ Dive into [federal](#), [state](#), and [local](#) policy recommendations for responding to rising mental health care and addiction recovery needs.
- ★ Review some of the latest data on [the systemic cost of behavioral health care](#), and walk through [state-level mental health and substance use outcomes](#).
- ★ Review some of the existing model language for mental health policy change—including the work by the [Kennedy Forum](#) and the [American Psychiatric Association](#).
- ★ **Contact our team** at: help@usofcare.org.

A photograph of a woman with her eyes closed, hugging a young child from behind. The image is overlaid with a semi-transparent blue filter. The text is centered over the image.

Thank you
*for working toward accessible
mental health care and SUD
treatment across the U.S.*

Appendix

Additional background information

Jake Machovsky



The [JEM Foundation](#), which led much of the effort, was founded in memory of Jacob Edward Machovsky.

Jake loved airplanes, his family, and playing with his dog, and dreamed of flying for the Air Force.

He also had bipolar disorder, and battled suicidal ideation. He was lost to suicide on January 11, 2016. He was 15 years old.

The JEM Foundation

The JEM Foundation is working to end youth suicide:

Methods include:

- ★ Advocacy for coverage and reimbursement parity for mental health care
- ★ Support for youth with mental illness, including first aid and a summer camp for youth experiencing serious mental health concerns
- ★ Support for parents & caregivers of those living with serious mental health concerns
- ★ The Mental Health Assistance Initiative Fund

Key Partners:

- ★ The AZ Coalition for Insurance Parity
- ★ MercyCare (Youth Mental Health First Aid)
- ★ Gene Sight (DNA Testing)

Leadership Roles

JEM Foundation: Built the coalition, maintained an emphasis on non-partisanship, and kept the focus on parity.

Governor Ducey's Office: made mental health a priority for 2020, championed the effort among lawmakers, and wove in other essential mental health reforms.

Bill Sponsors:

- [Senator Kate Brophy McGee](#)
- [Representative Jeff Weninger](#)

Carly Fleege, Hamilton Consulting (pro-bono): Introduced the JEM Foundation to key lawmakers, and helped them navigate the legislation and advocacy processes.

On-the-ground Support: Lobbying from [Arizona Psychiatric Society](#), the [Mental Health America of Arizona](#), & the [Arizona Chapter of the American Foundation for Suicide Prevention](#).