

Memorandum

To: House Human Services Committee

From: Susan Hall, Vermont Mental Health Counselors Association

Date: February 3, 2015

Re: H.20

Thank you committee members for the opportunity to present my concerns about H.20 as currently drafted. My perspective is informed by more than 30 years as a licensed clinician with extensive experience in both public and private sector healthcare delivery. My objection to this bill is based on quality and access concerns.

Licensed substance abuse counselors have historically been bachelors level clinicians who have received very focused training on the dynamics of substance abuse treatment; they have not been trained in the broader scope of mental health issues and treatment. Currently, licensed substance abuse counselors deliver services within their scope of practice and bill under the supervision of masters level mental health clinicians. This supervision provides a safety net for the clients.

From a dynamic perspective substance abuse tends to be driven by mental health issues. Treatment may well start with the behavioral aspects of substance use, but recovery most often means dealing with the underlying mental health issues – those stresses that drive one to drink or use drugs. Clients with severe mental health issues may present for substance abuse treatment - substance use may be an effective means to self- medicate. Without mental health training, the substance abuse counselor may overlook or simply not recognize signs and symptoms of a more serious mental health disorder. This effectively forestalls access to appropriate healthcare services. Currently licensed mental health supervisors provide a safety net for individuals struggling with substance abuse behaviors.

If licensed substance abuse counselors are permitted to bill directly to Medicaid for services delivered independently, the safety net for determining safe and appropriate treatment would be lost.

H.20 appears to be about fair payment for services, yet the consequences of enacting this bill will be to jeopardize both quality and access to safe appropriate care.

I suggest the following amendment to H.20 –

The Department of Vermont Health Access shall grant authorization to a licensed alcohol and drug abuse counselor to participate as a Medicaid provider to deliver ~~clinical and case coordination~~ counseling services within their scope of practice under the supervision of masters or higher level clinicians to Medicaid beneficiaries, regardless of whether the counselor is a preferred provider.

Thank you for considering this perspective.