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Testimony on HB 2459
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Mr. Chairman, members of the Committee, thank you for the opportunity to appear before you today to speak in support of House Bill 2459, the Kristi L. Bennett Mental Health Parity Act.

I want to talk to you about suicide. The Legislature has shown in recent years great concern about teen suicide and rightly so. You passed the Jason Flatt Act which requires all teachers to be trained annually in recognizing the signs of potential suicide and you established a school-based mental health pilot project in part to help students who were struggling in their lives. These were good ideas since a “new finding from a Centers for Disease Control report has epidemiologists and mental health experts stumped and concerned. According to the report, teenage suicide rates have increased nearly 56% from 2007 to 2017.”¹

But let’s think about other people in our communities.

Consider police officers: ²

- In 2019, 228 current or former officers died by suicide, compared with 172 in 2018, the group announced on Thursday.
- Chuck Wexler, executive director of the Police Executive Research Forum, told ABC News that Blue H.E.L.P.'s figure of 228 suicides for 2019 "is undoubtedly underreported."
- "Suicide is the number one officer safety issue," Wexler told ABC News.

Consider veterans and military personnel: ³

- The Department of Defense’s Annual Suicide Report- Calendar Year 2018 shows a suicide rate, per 100,000 service members, of 24.8 for active duty personnel in 2018, which is an increase of 2.9% from 2017.
- In 2018, the report shows 325 active duty, 135 National Guard and 81 Reserve personnel died by suicide.
- There were 6,139 veterans who died by suicide in 2017, which was an increase from 6,010 who died in 2016.

¹ <https://www.rollingstone.com/culture/culture-news/teen-suicide-study-increase-why-900711/>

² <https://www.purdue.edu/newsroom/releases/2019/Q3/new-reports-show-military-and-veteran-suicide-rates,-numbers-are-still-concerning.html>

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Consider farmers:⁴

- Research by four Cal Poly San Luis Obispo agriculture communication students found that suicide rates in agriculture are five times higher than the national average — and shockingly, even double the rate for military veterans.
- Suicide rates in agriculture are higher than for any other occupation: 84.5 per 100,000 people, according to the Centers for Disease Control.
- Suicide rates are about 50 percent higher today than they were during the farm crisis of the 1980s.

Consider Millennials: ⁵

- During the past decade drug-related deaths among that age group increased by 108%, alcohol-induced deaths by 69%, and suicides by 35%, according to the report from the Trust for America's Health and Well Being Trust.
- Young adults experienced a 35% increase in suicide rates between 2007 and 2017, compared with a 14% increase for 35- to 54-year-olds; a 24% increase for those 55 to 74; and 14% uptick for people older than 75.

Consider how things look for Kansas.

My wife, a school librarian, went through the Jason Flatt presentation in her school. These Kansas statistics were shared in that presentation:

- In Kansas suicide is:
 - The 2nd leading cause of death for ages 10-34.
 - The 4th leading cause of death for ages 35-54.
 - The 8th leading cause of death for ages 55-64.
 - The 18th leading cause of death for ages 65 and older.
- Suicide is the 10th leading cause of death overall in Kansas. On average, one person dies by suicide every 20 hours in the state.
- Three times more people in Kansas die by suicide than by homicide.

So, yes, we have a serious teen suicide crisis, but the sad truth is that we have a serious suicide epidemic in this country that the Jason Flatt Act is not going to solve. We must do more.

And one thing we can do is to guarantee that when someone needs help, they can get help. Mental health parity is supposed to be the law of the land but for too many people struggling with depression, anxiety, or substance abuse, help is being rationed by insurance providers.

This is what happened to Kristi Bennett, the young woman for whom this bill is named. Her family will tell you about that experience.

⁴ <https://www.farmprogress.com/outlook/farmer-suicide-topic-few-will-discuss>

⁵ <https://www.farmprogress.com/outlook/farmer-suicide-topic-few-will-discuss>

Some folks will assert that the problem is not enough providers, but the fact is that even when there are providers available, the insurance industry is second-guessing medical practitioners and denying coverage.

I have a personal story beyond Kristi's story to share with you.

I have a son who struggled with alcohol. I hope none of you ever face this, but my wife and I faced this with our son.

After a third DUI, he finally decided he needed help. He couldn't handle this on his own. My wife and I immediately went to work to find that help, eventually landing upon Valley Hope in Atchison, Kansas. Valley Hope, some of you might know, is an excellent multi-state alcohol and drug treatment center based in Norton, Kansas. Former Kansas Legislator Pat George served as the CEO.

Valley Hope took him in and evaluated him. They determined he needed this treatment. They handled notifying his insurance provider to cover the treatment.

You can imagine my shock when we were told that his treatment was denied by the insurance company because the insurance company determined he "was not an alcoholic." Valley Hope appealed and the appeal was turned down.

You see, the insurance provider said that prior to entering Valley Hope he had been sober for 10 days. That was basis for the determination that he was not an alcoholic.

I admit that he was indeed sober for those 10 days. You see, he had been released from county jail with an ankle monitor and a machine that required him blowing into periodically. He was locked in my house under the 24/7 supervision of my wife and I with a machine that reported his behavior to law enforcement.

He said to me at the time that maybe he could just try harder. But instead I took more than \$10,000 out of my own retirement savings to pay for Valley Hope myself.

Today, no thanks to the insurance industry, my son is a hard-working professional, paying his taxes, and staying away from alcohol. He was lucky because my wife and I love him enough to commit to help him. He was lucky because his parents had the resources to help him.

But what if you don't have those resources? What happens to child whose parents don't have a nest egg to tap?

This bill will not end the suicide epidemic. But this bill will give people hope. This bill places the decision about what help people need in the hands of medical professionals who meet with and diagnose the needs of individuals.

If someone tells you the problem is not the insurance companies rationing services or second-guessing the medical profession but rather an issue of not having enough providers or access to providers, I will disagree.

True, it seems like we don't have enough providers. But first we have a system that is designed to escape paying providers. If the system was designed to support patients by paying for the care the medical professionals deem necessary, there would be providers.

Please consider the terrible epidemic we face. Please consider the desperate need of Kansans suffering from substance abuse or other mental health challenges. Please pass House Bill 2459.