

From: Spieker, Andrea, MNH <[REDACTED]>

Sent: Thursday, February 6, 2020, 6:52 PM

To: Jennifer Cook

Subject: RE: support of Senate Bill No 249

As a provider in the community it is frustrating to see how what we do is based so often on insurance companies who don't know the person being treated. We are currently working with someone who is needing longer to be stabilized in the hospital but due to his insurance not wanting to pay more, the hospital is wanting to discharge him earlier than they would prefer. This sends folks back into the community without the solid foundation to keep help keep them stable.

When people are in a crisis state that requires hospitalization and reaching out for help it shouldn't be that difficult to get it. For some who qualify for case management services in the community, they may have an advocate to help them through this process. Most people don't have individuals on their side to help with navigating this or don't want to tell others what they are going through due to stigma. If someone feels they are needing to be hospitalized for MH reasons, the hospital needs to be the one to determine this not insurance company. I wouldn't go to my car insurance provider to fix my car (something they don't treat) so why would an insurance provider be responsible for determining treatment approvals.

Sorry in community mental health, most of our frustrations on admissions are different than what your sister experienced. I hope some of this is helpful and if there is anything else that I can do let me know. I will only be in ½ day tomorrow so I wanted to get this sent off in the hopes it will do you some good.

You are doing wonderful things with this and I wish you the best of luck!