



Sade Elhawary

AB 2551: Behavioral Health Affordability Act

SUMMARY

AB 2551 increases transparency about how many people must go out of network to access behavioral health care.

The bill requires health care service plans and health insurers to assess the cultural competency and equity of the services they provide to determine how accessible they are to individuals from different backgrounds.

BACKGROUND

Since the federal Patient Protection and Affordable Care Act, health care service plans and insurers have been required to provide medically necessary mental health services.

In 2020, the Legislature strengthened enforcement of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, which requires mental health and substance use disorder coverage to be no more restrictive or costly than medical or surgical coverage.

Despite these laws, many Californians still struggle to access behavioral health services.

Communities of color report some of the lowest rates of mental health service use. Californians who speak a language other than English, LGBTQIA+ individuals, and Black, Indigenous, and People of Color (BIPOC) communities face additional barriers to equitable care.

Many people must go out of network to find culturally affirming providers. Nationally, consumers spend about \$15 billion out of pocket each year for mental health treatment.

ISSUE

Access to behavioral health care remains a crisis in California and across the country.

Despite billions of dollars in public investment and updated laws requiring health care service plans and insurers to provide necessary care, many Californians still report difficulty accessing effective behavioral health services.

Communities of color face particular challenges in accessing care and report some of the lowest rates of mental health service use. Californians who speak a language other than English, LGBTQIA+ individuals, and Black, Indigenous, and People of Color (BIPOC) communities face additional barriers that make equitable access even harder.

Many consumers must go out of network to find providers who meet their cultural or linguistic needs. Navigating the system to find appropriate care can feel overwhelming, and going out of network often leads to high out-of-pocket costs.

SOLUTION

AB 2551 requires health plans and insurers to collect and publicly share data on how many people must go outside their network to get behavioral health care, and why. This includes whether people are going out of network because they cannot find care that is easy to navigate or meets their cultural or language needs.

The bill also requires health plans and insurers to conduct a cultural competency and health equity assessment of their enrollees or insureds.

SUPPORT

California Pan-Ethnic Health Network (CPEHN)

STAFF CONTACT

Blas Guerrero
Blas.Guerrero@asm.ca.gov
(916) 319-2057