

Employers Are Poised to Expand Mental Health Coverage in 2023

Challenges include men's reluctance to seek care, racial barriers, parity compliance

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Employers enhanced their mental health and well-being benefits for employees during the COVID-19 pandemic and are poised to continue expanding these offerings in 2023, new research shows. Even so, challenges in accessing care remain for many employees.

[Survey results](#) released in August by AHIP, a health insurers' trade association formerly known as America's Health Insurance Plans, highlight how health plans are improving access to mental health (also called behavioral health) services by bringing more high-quality providers into their networks and helping patients find available mental health appointments.

"Even before the COVID-19 pandemic, millions of Americans struggled with mental health and substance use challenges," said Kate Berry, senior vice president of clinical affairs and strategic partnerships at AHIP, based in Washington, D.C. "The mismatch between the supply of mental health and substance use disorder providers and the demand for care is a long-standing problem.

That's why health insurance providers are working hard to improve their provider networks and increase access to care."

When health care providers offer plans with a wide selection of mental health professionals in-network, effective mental health support is more accessible and affordable, Berry said.

AHIP fielded the survey in May and June among its members who offer health plans in the employer-sponsored group market, both self-insured plans that employers design with third-party administrators and fully insured plans purchased from insurance carriers.

"More than half of Americans, nearly 180 million, have employer-provided coverage for their health care needs—which offers an essential path to accessing much-needed mental health support," AHIP reported.

The survey also included plans sold in the individual market, such as those purchased on an Affordable Care Act marketplace exchange.

Based on responses from administrators of plans representing 95 million enrollees, the survey found that:

- **All respondents provided some telehealth coverage** for mental health services.
- **The number of in-network behavioral health providers** offered by health plans grew by an average of 48 percent in three years.
- **The overwhelming majority of health plans** (89 percent) are actively recruiting mental health care providers, including practitioners who reflect the diversity of the people they serve (83 percent), and 78 percent have increased payments to providers in efforts to recruit more high-quality professionals to their plan networks.
- **The number of providers eligible to prescribe medication-assisted therapy (MAT)** for substance use disorder, including opioid dependence, has more than doubled—growing 114 percent over three years.

Easing Access to Care

A large majority (83 percent) of plans reported they assist enrollees with finding available mental health appointments. In addition, 78 percent use specialized case managers for follow-up after emergency room and inpatient care or starting new medications.

"Health insurance providers are taking steps to improve mental health care by proactively identifying behavioral health needs of their members, collaborating with providers and reducing stigma," Berry said. "While a lot of work has been done, health insurance providers recognize the need to address systemic challenges. This can only be accomplished by all health care stakeholders working collaboratively to ensure Americans have affordable access to the high-quality mental health support they deserve."

Many therapists, however, prefer to remain outside the insurance system and to collect payment directly from their patients, which limits access to those with lower incomes and limited savings. For instance, the Manhattan Therapy Collective, a mental health practice in New York City, [chose to remain an out-of-network provider](#) because insurers "compensate therapists on a very delayed timetable (if at all) and at lower than market level rates," and may limit the number of sessions they'll pay for per year, according to their website.

Other therapists may [only offer a certain number of slots to those who can't pay out of pocket](#), according to the practitioners' website psychology.org. One way to improve the situation is through telehealth, as virtual appointments increase the number of available therapy options for patients and can reduce costs for practitioners, who may not have to pay for office space, the website noted.

A Gender Divide

Women overwhelmingly value mental health benefits compared with men (70 percent compared with 49 percent), [according to a recent report](#) from benefits technology firm PeopleKeep. The finding is from a May 2022 survey of over 900 employees at small and midsize businesses.

"As employers consider their benefits offerings, they should acknowledge that priorities are sometimes different based on demographics," said Victoria Glickman Hodgkins, PeopleKeep's CEO.

The fact that men don't place as much value in mental health benefits is a challenge for mental health providers. "From a young age, boys often are told that they need to be strong and independent, keeping their emotions and thoughts to themselves," Siddharth K. Shah, a psychiatrist in Orlando, Fla., [wrote last November](#). "This belief has far-reaching consequences," he added.

"In the United States, men are [3.6 times more likely](#) to die by suicide than women," Shah noted. "The higher suicide risk is associated with men being less likely to seek help for mental health struggles."

Those concerns are shared by Rob Whitley, an associate professor in the Department of Psychiatry at McGill University in Montreal. Writing in *Psychology Today* last year, [he encouraged](#) employers and public health providers to increase their outreach efforts aimed at men, such as by:

- **Offering mental health literacy programs** in workplaces and elsewhere to improve understanding of mental health.
- **Offering male-sensitive mental health services**, such [as peer support programs for men](#).
- **Ensuring equal treatment of mental and physical health issues** in workplaces, discussed in the box below.

Ensure Mental Health Parity

The Mental Health Parity and Addiction Equity Act (MHPAEA) became law in 2008 but wasn't "given teeth" until Congress passed the Consolidated Appropriations Act, 2021, requiring employers to evaluate their compliance with the MHPAEA and ensure they provide equal coverage limits for mental health/substance use disorder benefits and medical/surgical benefits.

Last April, the Department of Labor [issued guidance](#) to help plan sponsors and administrators comply with the stepped-up compliance requirements.

Employers, as health plan fiduciaries, "are responsible for making sure vendors have their act together and are following up [on mental health parity requirements], or else employers bear the blame," said Jay Kirschbaum, benefits compliance director and senior vice president at World Insurance Associates, based in Washington, D.C., [when he spoke earlier this year](#) at the SHRM Employment Law & Compliance Conference 2022. "It's your responsibility to make sure your issuers or vendors are complying with the rules."

Racial Barriers

"Racial and ethnic minorities [often suffer from poor mental health outcomes due to the cultural stigma and lack of access to mental health care services](#)," according to the U.S. Department of Health and Human Services Office of Minority Health. In addition, many people from historically marginalized groups face obstacles in accessing needed mental health care, an issue compounded by a lack of racial and ethnic diversity among mental health care practitioners.

"Black and African American providers, who are known to give more appropriate and effective care to Black and African American help-seekers, [make up a very small portion of the behavioral health provider workforce](#)," according to Mental Health America (MHA), a nonprofit that addresses the needs of people living with mental illness.

Because nonwhite racial and ethnic groups [are underrepresented](#) among members of the American Psychological Association, "some may worry that mental health care practitioners are not culturally competent enough to treat their specific issues," MHA said.

The group noted the following statistics from the U.S. Centers for Disease Control and Prevention:

- **58 percent of Black young adults ages 18-25** and 50.1 percent of Black adults ages 26-49 with serious mental illness did not receive treatment (as of 2018).
- **Nearly 90 percent of Black people over the age of 12** with a substance use disorder did not receive treatment.

Because of barriers to treatment, "Black and African American people are more likely to experience chronic and persistent, rather than episodic, mental health conditions," according to MHA.

Progress will be made to overcome these challenges "as light is shed on these issues—and the general public holds accountable policymakers and health systems to evolve better systems [that] eliminate inequities in mental health services," the group said.

According to HR consultants at Mercer, "[virtual behavioral health care can provide better access for marginalized groups](#) due to its convenience, timeliness, and affordability compared to in-person visits."

They advise employers to focus on keeping telehealth therapy services "affordable to encourage use in the most vulnerable and high-risk populations."

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