The Challenges of Private Practice
A Study of Clinicians’ Experiences Providing Mental Health Care in Massachusetts

Executive Summary
April 2015
ABOUT THE STUDY
Developed and conducted by the University of Massachusetts Donahue Institute, the Challenges of Private Practice study documents the experiences of a broad range of private practice clinicians – and the challenges they face in providing mental health care in Massachusetts.

The Donahue Institute survey was commissioned by CliniciansUNITED, a multi-disciplinary group of mental health clinicians affiliated with the Massachusetts Human Service Workers Union – SEIU Local 509. Through professional research, public education and advocacy, CliniciansUNITED aims to forward policies that improve the affordability and accessibility of mental health care for all Bay State residents.

To view a full copy of the Challenges of Private Practice study, a video presentation of the survey’s findings by lead researcher Christina Citino and other related documents, visit bit.ly/UMDIresearch2015.

ABOUT THE PARTICIPANTS
Contacted through a combination of email, phone and mail over a three-month period, 785 Massachusetts-based mental health clinicians participated in the Donahue Institute survey. The vast majority of participants (662) serve in private practice, with diverse representation both geographically [FIG. 1] and across disciplines [FIG. 2].

FIGURE 1

<table>
<thead>
<tr>
<th>Geographic Region Served</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater Boston</td>
<td>354</td>
<td>45.1%</td>
</tr>
<tr>
<td>North Shore</td>
<td>122</td>
<td>15.5%</td>
</tr>
<tr>
<td>Pioneer Valley</td>
<td>95</td>
<td>12.1%</td>
</tr>
<tr>
<td>South Shore</td>
<td>73</td>
<td>9.3%</td>
</tr>
<tr>
<td>Central MA</td>
<td>50</td>
<td>6.4%</td>
</tr>
<tr>
<td>Cape &amp; Islands</td>
<td>38</td>
<td>4.8%</td>
</tr>
<tr>
<td>Berkshires</td>
<td>15</td>
<td>1.9%</td>
</tr>
</tbody>
</table>
THE ‘CHALLENGES OF PRIVATE PRACTICE’ STUDY FINDS SIGNIFICANT BARRIERS TO MENTAL HEALTH CARE DELIVERY

Despite the high proportion of Massachusetts residents who maintain health coverage, low insurance reimbursement rates and administrative obstacles significantly affect access to mental health care. Data from the study clearly demonstrates that private practice clinicians, in particular, face significant barriers to delivering care – especially in relation to their interactions with insurance companies.

These challenges negatively impact access to vital mental health services in three key areas:

- Clinicians’ inability to accept patients
- Clinicians’ reduced participation in insurance panels
- Insurers’ denial of necessary care
INABILITY TO ACCEPT PATIENTS
The Donahue Institute study finds that many clinicians have been forced to turn away potential patients due to insurance panel pressures – directly affecting clients’ ability to find a clinician who can see them and address important mental health issues.

- Among participating mental health clinicians, 81% say they turn away at least one patient each month
- Nearly half of clinicians (44%) say they’ve turned away five or more patients each month [FIG. 3]
- This problem is particularly acute in regions like the Cape & Islands, where suicide rates eclipse the rest of the state by more than four times
- The situation is worsening: nearly one-half of clinicians report a marked increase in the number of patients they’ve turned away in the past year

Making matters worse, many clinicians feel they are forced to take on less complicated patients or reduce the length of sessions in response to insurance company policies – just to ensure their practice remains viable.
REDUCED INSURANCE PARTICIPATION

The downward pressures applied by insurers lead many clinicians to participate in fewer insurance panels or intentionally take on more private pay clients. By far, the most common reason for turning away a potential patient is non-participation in the client’s insurance panel – with 61% of clinicians citing this barrier. This challenge has a significant impact on the estimated 86% of patients seen by private practice clinicians who utilize insurance to pay for mental health services.

- One-in-six (15.5%) private practice clinicians no longer accept insurance
- More than one-third (35.6%) of clinicians have dropped off one or more insurance panels in the last year alone
- Nearly two-thirds (63.5%) have opted against joining an additional panel in the last year
- The most common reasons cited for these actions are inadequate insurance reimbursement rates (90.1%) and difficulty obtaining payment from insurers (50.3%)
- More than 40% of clinicians report being rejected by an insurance panel in the past five years – with most (68%) being told the respective insurer is not accepting new providers or patients in their geographical area

Even more alarming, providers with the most experience and expertise are the least likely to accept insurance [FIG. 4], citing low reimbursement rates and administrative headaches.

FIGURE 4

Private Practice Clinicians Participating in Insurance Panels by Years in Private Practice
DENIAL OF CARE & UNPAID CLAIMS
Low reimbursement rates and administrative challenges are not the only challenges affecting quality and access to mental health care. Participating clinicians report that insurers often deny care that is deemed to be medically necessary or refuse to pay for the appropriate length of treatment [FIG. 5]. In fact, more than 97% felt that insurers’ authorization of care is insufficient.

FIGURE 5

<table>
<thead>
<tr>
<th>Private practice clinicians report that in the past 12 months they:</th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Requested initial authorization for care (n=528) that was denied.</td>
<td>96</td>
<td>One in Six (18.2%)</td>
</tr>
<tr>
<td>Requested authorization for continued care (n=496) that was denied before termination was appropriate.</td>
<td>167</td>
<td>One in Three (33.7%)</td>
</tr>
<tr>
<td>Requested a higher level of clinically appropriate care (n=529) that was denied.</td>
<td>130</td>
<td>One in Four (24.6%)</td>
</tr>
</tbody>
</table>

Unfortunately, insurers’ denial of mental health services is not restricted to authorization of recommended care. Clinicians report that payment is often denied even after services are delivered.

- Of the clinicians who accept insurance, nearly two-thirds (65.9%) report being refused payment for an insurance claim in the past 12 months
- More than half (57.5%) had between one and 10 unpaid insurance claims; with 42.5% reporting more than 10 unpaid claims
- Several clinicians report receiving an insurer’s demand to return funds from a previously-paid claim – with two-thirds asked to return $1,000 or more to an insurance company
CONCLUSION
Despite positive trends in the number of Massachusetts residents who are covered by insurance, along with progressive mental health parity laws, the University of Massachusetts Donahue Institute study clearly demonstrates that access to care is still a serious issue. Low reimbursement rates and insurers’ administrative hurdles negatively impact the way mental health clinicians run their practices – from accepting fewer patients and reductions in care regimens, to outright denial of critical services. Three out of four (76%) participating clinicians cite deep concerns with the future of mental health practice. Among the extensive comments provided by clinicians were reports of feeling burnt-out, devalued, overworked and micromanaged by insurers. In the end, mental health clinicians feel insurers' policies directly lead to less time and energy to focus on their clients and do good clinical work.

Combined, these challenges present real barriers to the Commonwealth’s efforts to ensure mental health parity in Massachusetts. Real action is needed to reverse this downward trend – and soon.

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