



TO: Cassie Soucy, Senior Policy Advisor, Oregon Department of Consumer & Business Services and the HB 3046 Rules Advisory Committee  
FROM: Nancy Haque, Executive Director, Basic Rights Oregon  
DATE: November 30, 2021  
RE: Comments RE: HB 3046 (2021) – Behavioral Health and Mental Health Parity

Dear Cassie and HB 3046 Rules Advisory Committee Members,

Thank you for the invitation to submit feedback to the HB 3046 Rules Advisory Committee. For 25 years, Basic Rights Oregon has advocated for public policy that meets the needs of our LGBTQ2SIA+ communities. Often, we hear from community members seeking help with mental health challenges. Unfortunately, we do not have the systems in place to confidently refer them to a competent provider.

The LGBTQ2SIA+ community encompasses a wide range of individuals with separate and overlapping challenges regarding their mental health. Other identity factors including race and economic status can affect the quality of care they receive or their ability to access care. It's crucial for the community to confront these barriers *and* mental health symptoms with an LGBTQI-inclusive provider.

Although the full range of LGBTQ2SIA+ identities are not included in large-scale studies of mental health, there is strong evidence that members of this community are at a higher risk for experiencing mental health conditions — especially depression and anxiety disorders. According to recent studies:

- LGB adults are more than twice as likely as heterosexual adults to experience a mental health condition.
- Transgender individuals are nearly four times as likely as cisgender individuals to experience a mental health condition.

We also know that Oregon's youth are especially at risk. The Oregon Health Authority's recent Healthy Teens Survey reported that:

- nearly 50% of LGB 8th graders have had suicidal thoughts.
- roughly 25% of LGB 8th graders have attempted suicide.
- almost 33% of transgender 8th graders have attempted suicide.

Discrimination, economic insecurity, physical violence, prejudice, denial of civil human rights, harassment, family rejection and trauma leads many LGBTQ2SIA+ individuals to experience anxiety, depression, suicidal ideation, substance use disorders and other behavioral health issues.

If we want Oregon to be a safe and supportive environment for all, it is critical that LGBTQ2SIA+ people experiencing behavioral health challenges have access to appropriate and affirming providers no matter where they live in Oregon or how they are insured.

In Section 6 (4) (a) of HB 3046 that covers network adequacy, the bill lists groups of individuals for which an insurer must prove they have an adequate number of providers to address the need and gives the agency the authority to add additional groups to this list in rule. **For the reasons stated above, we request that "individuals who are who are gay, lesbian, bisexual, transgender, and any other minority gender identity or sexual orientation" be added to that list.**

We feel that this request is in alignment with the legislative intent behind HB 3046 and will help ensure that insurance carriers consider the needs of LGBTQ2SIA+ individuals when establishing their provider networks.

Thank you for your work and consideration.

Sincerely,

Nancy Haque, Executive Director, Basic Rights Oregon