2014 MENTAL HEALTH PARITY SURVEY
Methodology

• This survey was conducted online within the United States by Harris Poll on behalf of the American Psychological Association between March 7 and 24, 2014 among 1,000 adults aged 18+ who reside in the U.S. In addition, 250 interviews were collected among adults 18+ living in the U.S. who have been treated by a psychologist or mental health professional and used their insurance.

• Results for the general population were weighted as needed for age, sex, race/ethnicity, education, region and household income. Propensity score weighting was also used to adjust for respondents’ propensity to be online.
  
  – The weighting profile for the oversample of adults who have been treated by a psychologist or mental health professional and used their insurance was created based on the profile of this same population from the general population survey.

• Respondents for this survey were selected from among those who have agreed to participate in Harris Poll surveys. Because the sample is based on those who were invited to participate in the Harris Poll online research panel, no estimates of theoretical sampling error can be calculated.

• Throughout this report there is reference to the 2010 data collected among adults in the general population. This data is labeled as ‘2010’. The 1,000 interviews among the general population collected for the most recent survey is labeled as ‘2014’. The oversample of adults who have been treated by a psychologist or mental health professional and used their insurance have been combined with adults in the general population who indicated the same. This group is referred to as ‘those who have used mental health benefits’.

• The letters A, B, and C are used throughout this report to indicated statistically significantly differences between groups.
Executive summary

- Estimates from the Substance Abuse and Mental Health Services Administration (SAMHSA) suggest that nearly one in five Americans faces mental illness each year. Yet, few people know that health insurers are required to provide equitable coverage for mental health, behavioral health and substance-use disorders.

- The Mental Health Parity and Addiction Equity Act was passed in 2008, but only 4 percent of Americans say they are familiar with the law.

- Under the parity law, insurance companies must provide mental and behavioral health coverage that is equal to or better than coverage for physical health, with no annual limits or higher co-pays or deductibles for treatment of mental health disorders or substance use. The law applies to most employer-provided health plans and to individual plans purchased through the new state and federal health insurance exchanges.
Executive summary

- Awareness of mental health parity has not changed much since 2010 when the survey was first conducted. Few are aware of parity or the parity law.
  - Adults aware of the term “mental health parity” has remained unchanged since 2010 (7 percent in 2010 vs. 7 percent in 2014).
  - Similarly, the proportion aware on an unaided basis of the Mental Health Parity and Addiction Act of 2008 (MHPAEA) has remained unchanged (4 percent in 2010 vs. 4 percent in 2014).
  - While the survey found that 61 percent of adults reported that they have adequate mental health coverage, many report details of their insurance coverage that seem at odds with the provisions of the law.
    - Almost one third (29 percent) of respondents said their insurance has different co-pays or other limits for mental health care.
    - Almost one in four (24 percent) said they aren’t sure if their insurance offers the same coverage for mental and physical health.
    - Only slightly more than half (56 percent) said that their current health insurance provides coverage to see a psychologist or other mental health professional.
  - 31 percent of adults said they thought mental health coverage was absolutely essential or very important.
Executive summary

Americans who have used mental health benefits are more likely to understand the importance of mental health coverage. Although most say the process of using their mental health benefits was easy, they are also more likely to say that having help navigating their mental health insurance via a guide or brochure would be helpful.

- Those who have used mental health benefits are more likely than adults overall to say it is important for them to have mental health insurance (57 percent vs. 31 percent of adults overall).
- Those who have used mental health benefits are more likely than adults overall to say if they were offered two plans, one with and one without mental health coverage, having mental health coverage would have a very strong or strong impact on their decision (53 percent mental health benefit users vs. 22 percent adults overall).
- Those who have received mental health treatment are more likely to say they would seek treatment for a variety of reasons including:
  - Feeling depressed (65 percent mental health benefit users vs. 48 percent general population);
  - Feeling anxious (46 percent vs. 25 percent);
  - The death of a loved one (36 percent vs. 24 percent);
  - Conflict or tension with a family member (33 percent vs. 22 percent); and,
  - A life change (31 percent vs. 16 percent).
Executive summary

Continued

– More than two-thirds (68 percent) of those who have used their benefits describe the process of using their insurance easy.

– Those who have used their mental health benefits are more likely than adults overall to say they think a guide or brochure to help them better understand their mental health coverage would be very or extremely helpful (Those who have had treatment 37 percent vs. 2014 general population 28 percent).
Executive summary

• Cost is a big concern when it comes to mental health insurance and for some comes before comfort. Among those who considered treatment and did not go, several top reasons concerned the cost of treatment. In addition, when adults overall were asked why they or family members would not seek treatment the most common response was the cost.
  – When asked what information they would need before being treated by a psychologist or mental health professional, 75 percent said they would need to know if they take insurance whereas 68 percent said they would need to be comfortable with their provider.
  – For those who considered treatment but never went, the top reasons for not seeking treatment were concerns about affordability including not being able to afford the co-pays (15 percent) and the difficulty of finding a provider with an affordable rate (13 percent).
  – The most common reasons adults cite for not using their insurance when receiving treatment is lack of coverage at the time (27 percent). Little to no difference in cost was the second most common response (26 percent).
  – Adults are most likely to say they would not seek treatment due to the cost of treatment which was also the most common response in 2010 (2010 20 percent, 2014 22 percent).
AWARENESS OF MENTAL HEALTH PARITY

Since 2010, the proportion of adults aware of the term “mental health parity” has remained unchanged. Those who have used their mental health benefits are more likely than adults overall to say they have heard of the term “mental health parity”.

<table>
<thead>
<tr>
<th>Year</th>
<th>Yes (%)</th>
<th>No (%)</th>
<th>Not sure (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010 (A)</td>
<td>83%</td>
<td>10%</td>
<td>7%</td>
</tr>
<tr>
<td>2014 (B)</td>
<td>87%</td>
<td>6%</td>
<td>9%</td>
</tr>
<tr>
<td>Mental health benefit users (C)</td>
<td>79%</td>
<td>9%</td>
<td>13%</td>
</tr>
</tbody>
</table>

BASE: ALL RESPONDENTS (2010 n=2940; 2014 n= 1000; Mental health benefit users n=471)

Q815 Have you heard of the term “mental health parity”?

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AWARENESS OF MENTAL HEALTH PARITY LAW

Similarly, since 2010, the proportion of adults aware of Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) has remained unchanged. Again, those who have used their mental health benefits are more likely than adults overall to say they have heard of the legislation.

BASE: ALL RESPONDENTS (2010 n=2940; 2014 n=1000; Mental health benefit users n=471)
Q825 Have you heard about the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA)?

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AIDED AWARENESS OF PARITY LAW

Even after being given a description of MHPAEA, few of those who were not aware of the name itself say they are aware of the act. This remains unchanged since 2010.
Though not significant, the proportion of those with a positive impression of MHPAEA has increased since 2010. Those who have used their mental health benefits are most likely to have a positive view of the act.

**BASE: HEARD OF MHPAEA (2010 n=156; 2014 n=61*; Mental health benefit users n=52*)

Q835 Was what you heard about Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) positive, negative or neutral?

*Note small base size
MENTAL HEALTH EQUALITY

Those who have used their mental health benefits are more likely than adults overall to say they think cost of prescriptions and co-pays on a mental health plan should be equal to that on a physical health plan.

% Answering ‘Yes’

- Cost of prescriptions: 2010 (A) 85%, 2014 (B) 82%, Mental health benefit users (C) 88%
- Co-pay: 2010 (A) 84%, 2014 (B) 79%, Mental health benefit users (C) 84%
- In-network and out-of-network coverage: 2010 (A) 80%, 2014 (B) 78%, Mental health benefit users (C) 81%
- Deductible: 2010 (A) 79%, 2014 (B) 75%, Mental health benefit users (C) 77%
- Coinsurance: 2010 (A) 78%, 2014 (B) 70%, Mental health benefit users (C) 74%
- Out-of-pocket maximums: 2010 (A) 76%, 2014 (B) 72%, Mental health benefit users (C) 78%
- Lifetime or annual dollar limits: 2010 (A) 67%, 2014 (B) 63%, Mental health benefit users (C) 68%
- Limits to hospital days or outpatient treatment sessions: 2010 (A) 64%, 2014 (B) 60%, Mental health benefit users (C) 56%

BASE: ALL QUALIFIED RESPONDENTS (2010 n=2940; 2014 n=1000; Mental health benefit users n=471)

Q810 Do you think that mental health coverage on a health plan should be equal to physical coverage for any of the following?

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ADEQUACY OF MENTAL HEALTH COVERAGE

Adults this year are more likely than those in 2010 to say they have adequate mental health coverage. Those adults in the oversample are more likely than adults overall to say they have adequate mental health coverage.

<table>
<thead>
<tr>
<th>Year</th>
<th>Strongly agree</th>
<th>Somewhat agree</th>
<th>Somewhat disagree</th>
<th>Strongly disagree</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010 (A)</td>
<td>23%</td>
<td>31%</td>
<td>6%</td>
<td>10%</td>
<td>29%</td>
</tr>
<tr>
<td>2014 (B)</td>
<td>29%</td>
<td>32%</td>
<td>10%</td>
<td>9%</td>
<td>19%</td>
</tr>
<tr>
<td>Mental health benefit users (C)</td>
<td>31%</td>
<td>38%</td>
<td>12%</td>
<td>10%</td>
<td>8%</td>
</tr>
</tbody>
</table>

*BASE: ALL QUALIFIED RESPONDENTS (2010 n=2940; 2014 n=1000; Mental health benefit users n=471)*

Q715 Do you feel you have adequate mental health coverage?

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MENTAL HEALTH REIMBURSEMENT

Adults in 2014 are more likely to say their insurance pays for them or reimburses them if they need to see a mental health professional. A vast majority (82 percent) of those who have used their benefits say the same, significantly more than adults overall.

% Reporting ‘Yes’

2010 (A) 47%
2014 (B) 56%
Mental health benefit users (C) 82%

BASE: ALL QUALIFIED AND HAS HEALTH INSURANCE (2010 n=2530; 2014 n=927; Mental health benefit user n=439)

Q720 Does your current health insurance pay for you (or reimburse you) if you need to see a psychologist or mental health professional?

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Health Insurance Parity

Adults in the oversample are most likely to know details about their health insurance. Similar proportions of adults in 2010 and 2014 say their insurance offers the same coverage for physical and mental health.

**% Absolutely Essential/Very Important**

- **My insurance offers same coverage for physical and mental health.**
  - 2010 (A): 49%
  - 2014 (B): 48%
  - Mental health benefit users (C): 52%

- **My insurance has different co-pays or other costs or limits for physical and mental health.**
  - 2010 (A): 29%
  - 2014 (B): 29%
  - Mental health benefit users (C): 36%

- **Not sure**
  - 2010 (A): 24%
  - 2014 (B): 24%
  - Mental health benefit users (C): 14%
Adults who have used their mental health benefits are most likely to say they have contacted their insurance and employer to inquire about their mental health benefits. The percentage of adults overall who report they have contacted their insurance provider about their benefits has not changed greatly since 2010.

% Reporting ‘Yes’

<table>
<thead>
<tr>
<th></th>
<th>2010 (A)</th>
<th>2014 (B)</th>
<th>Mental health benefit users (C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contacted Insurance Provider</td>
<td>12%</td>
<td>10%</td>
<td>30% B</td>
</tr>
<tr>
<td>Contacted Employer</td>
<td>N/A</td>
<td>7%</td>
<td>18% B</td>
</tr>
</tbody>
</table>

BASE: ALL QUALIFIED AND HAS HEALTH INSURANCE (2010 n=2530; 2014 n=927; Mental health benefit user n=439)

Q735 Have you ever contacted your insurance provider to inquire about your mental health benefits?
Q736 Have you ever contacted your employer to inquire about your mental health benefits? NEW IN 2014
TYPE OF INQUIRY

Adults overall are most likely to contact their providers about coinsurance, co-pay or deductibles. Those who have used their mental health benefits are most likely to say they contacted their provider for referrals.

**Type of Information Sought**

- **Information about the coinsurance, co-pay or deductible**
  - 2010 (A): 48%
  - 2014 (B): 47%
  - Mental health benefit users (C): 42%

- **Referrals to providers**
  - 2010 (A): 27%
  - 2014 (B): 35%
  - Mental health benefit users (C): 50%

- **In-network and out-of-network coverage**
  - 2010 (A): 27%
  - 2014 (B): 34%
  - Mental health benefit users (C): 39%

- **Information about outpatient treatment sessions or number of hospital days**
  - 2010 (A): 30%
  - 2014 (B): 29%
  - Mental health benefit users (C): 35%

- **Information about out-of-pocket maximums**
  - 2010 (A): 23%
  - 2014 (B): 29%
  - Mental health benefit users (C): 32%

- **Information about medication coverage**
  - 2010 (A): 20%
  - 2014 (B): 28%
  - Mental health benefit users (C): 32%

- **Information about lifetime or annual dollar limits**
  - 2010 (A): 14%
  - 2014 (B): 20%
  - Mental health benefit users (C): 30%

- **Reimbursement process**
  - 2010 (A): 16%
  - 2014 (B): 15%
  - Mental health benefit users (C): 16%

- **Other**
  - 2010 (A): 3%
  - 2014 (B): 5%
  - Mental health benefit users (C): 6%

**BASE: QUALIFIED AND HAS CONTACTED PROVIDER ABOUT MENTAL HEALTH COVERAGE (2010 n=271; 2014 n=87; Mental health benefit users n=116)**

Q745 When you contacted your provider to inquire about your mental health benefits, what kind of information were you seeking? Please select all that apply.

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RESOURCES FOR MENTAL HEALTH TREATMENT

The most common resource for adults when seeking information about mental health treatment is their PCP followed by their insurer’s website. Those who have used their benefits are more likely to report resources such as the internet, a mental health professional they know or an online referral locator.

### Resource Mentioned

<table>
<thead>
<tr>
<th>Resource</th>
<th>2014 (B)</th>
<th>Mental health benefit users (C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My primary care physician (PCP)</td>
<td>55%</td>
<td></td>
</tr>
<tr>
<td>My insurer’s list of providers (insurer’s website, directory of mental health professionals or telephone referral)</td>
<td>49%</td>
<td></td>
</tr>
<tr>
<td>Internet search or a mental health professional's website</td>
<td>30%</td>
<td></td>
</tr>
<tr>
<td>A psychologist, social worker or other mental health professional that you know</td>
<td>37%</td>
<td></td>
</tr>
<tr>
<td>Friend, family member or coworker</td>
<td>24%</td>
<td></td>
</tr>
<tr>
<td>My company’s Employee Assistance Program (EAP)</td>
<td>15%</td>
<td></td>
</tr>
<tr>
<td>Online referral or locator services (not provided by an insurance company)</td>
<td>18%</td>
<td></td>
</tr>
<tr>
<td>Another health care professional (not primary care physician)</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>Clergy</td>
<td>7%</td>
<td></td>
</tr>
<tr>
<td>My school</td>
<td>5%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>5%</td>
<td></td>
</tr>
</tbody>
</table>

**BASE: ALL QUALIFIED RESPONDENTS (2014 n=1000; Mental health benefit users n=471)**

Q1746 If you wanted to seek mental health treatment where would you look for information? Please select all that apply.
INFORMATION NEEDED BEFORE BEING TREATED

Adults are most likely to say they would need to know if the provider takes their insurance. Comfort is secondary. Those who have used their insurance benefits are more likely to say they would need to know a provider takes their insurance and if they are comfortable with them before being treated.

**Information Needed Prior to Receiving Treatment**

- **If they take my insurance (this includes insurance provided by private companies or government programs, such as Medicare and Medicaid)**: 75% 81% \(B\)
- **If I am comfortable with them**: 68% 75% \(B\)
- **Their area of expertise**: 60% 65%
- **Location of their office**: 57% 60%
- **Ratings from previous patients**: 33% 28%
- **Their demographics (gender, age, ethnicity, etc.)**: 19% 23%

Note: Only responses > 1% are shown.

**BASE: ALL QUALIFIED RESPONDENTS (2014 Gen Pop n=1000; Mental health benefit users n=471)**

Q747 What would you need to know about a psychologist or other mental health professional before being treated by them? Please select all that apply.

NEW IN 2014

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POTENTIAL REASONS FOR TREATMENT

When asked what would make them seek treatment, adults are most likely to say depression followed by substance abuse and feeling anxious. Those who have previously used their mental health benefits are more likely to say they would seek treatment for a variety of reasons.

Reason Mentioned

- Feeling depressed: 48% (65% B)
- A substance abuse issue: 27% (29%)
- Feeling anxious: 25% (46% B)
- A death of a close family member or friend: 24% (36% B)
- Conflict or tension with my family: 22% (33% B)
- A life change (e.g., getting married, getting a divorce, moving, lost a job, etc.): 16% (31% B)
- My child having difficulties (e.g., academic or behavioral difficulties): 16% (17%)
- None: 5% (2%)
- Don't know: 3%
- Decline to answer: 15% C

Note: Only responses > 1% are shown.

BASE: ALL QUALIFIED RESPONDENTS (2014 Gen Pop n=1000; Mental health benefit users n=471)
Q1748 What would make you seek mental health treatment? Please select all that apply.
NEW IN 2014
EXPERIENCE WITH TREATMENT

Similar to 2010, around a quarter of the general population say they have ever received treatment or therapy from a therapist or mental health professional.

BASE: ALL QUALIFIED RESPONDENTS (2010 n=2940; 2014 n=1000)

Q750 Have you ever received treatment or therapy from a psychologist or other mental health professional?

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Adults who have seen a mental health professional most commonly found their provider through their PCP. Referrals from friends, family members, or co-workers was the second most common response.
REASONS FOR NOT SEEKING MENTAL HEALTH TREATMENT

When asked why they or a family member might not seek treatment, adults are most likely to point to the cost of treatment which was also the most common response in 2010. Adults in 2014 are more likely to say ‘lack of insurance coverage’ than adults in 2010.

<table>
<thead>
<tr>
<th>Hypothetical Reason for Not Seeking Treatment</th>
<th>2010 (A)</th>
<th>2014 (B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerns over the cost of treatment</td>
<td>20%</td>
<td>22%</td>
</tr>
<tr>
<td>Lack of insurance coverage</td>
<td>16%</td>
<td>21% A</td>
</tr>
<tr>
<td>Not knowing if it's really appropriate to seek help</td>
<td>14%</td>
<td>13%</td>
</tr>
<tr>
<td>Lack of knowledge about how to find the right professional for your needs</td>
<td>9%</td>
<td>9%</td>
</tr>
<tr>
<td>Belief that therapy doesn't work</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Concerns over privacy or confidentiality</td>
<td>8%</td>
<td>9%</td>
</tr>
<tr>
<td>Belief there is a stigma associated with therapy or concern about what others might think of you</td>
<td>8%</td>
<td>6%</td>
</tr>
<tr>
<td>Lack of time</td>
<td>7%</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>9%</td>
<td>7%</td>
</tr>
</tbody>
</table>

BASE: ALL RESPONDENTS (2010 n=2940; 2014 n=1000)

Q780 Please indicate the top three reasons you or a family member might give for not seeking treatment.
HELPFULNESS OF GUIDE TO BENEFITS

Those who have used their mental health benefits are more likely than adults overall to say they think a guide or brochure to help them better understand their mental health coverage would be very or extremely helpful.

Helpfulness Rating

<table>
<thead>
<tr>
<th>Percentage</th>
<th>2014 (B)</th>
<th>Mental health benefit users (C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely helpful</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>Very helpful</td>
<td>17%</td>
<td>25B</td>
</tr>
<tr>
<td>Helpful</td>
<td>30%</td>
<td>33%</td>
</tr>
<tr>
<td>Somewhat helpful</td>
<td>29%</td>
<td>25%</td>
</tr>
<tr>
<td>Not at all helpful</td>
<td>13C</td>
<td>5%</td>
</tr>
</tbody>
</table>

BASE: ALL QUALIFIED (2014 n=1000; Mental health benefit users n=471)
Q806 Please rate how helpful it would be to have a guide or a brochure to help you better understand your mental health coverage?
NEW in 2014

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