



Insured Adults Struggle to Access Mental Health Care

A recent [survey](#) by the Kaiser Family Foundation (KFF) found that nearly half (43%) of insured adults who rated their mental health as “fair” or “poor” were unable to receive necessary mental health services or medication in the past year. Amid a shortage of mental health professionals, many patients are struggling to find mental health care services. Insurance issues, such as lack of coverage and availability, may exacerbate the problem, KFF found.

One in 5 survey respondents with “fair” or “poor” mental health said there was a time in the past year when their insurance didn’t cover a therapist or mental health treatment. Additionally, a large percentage of insured adults with “fair” or “poor” mental health gave their insurance plan negative ratings for the availability (45%) and the quality (37%) of mental health therapists under their plan.

Three in 4 (74%) insured adults who received mental health treatment in the past 12 months reported problems with their insurance.

Barriers to Care

Respondents listed numerous barriers to receiving needed mental health treatment or medication, such as the following:

- Too busy or couldn’t get time off from work or school (47%)
- Couldn’t find a trusted provider (44%)
- Couldn’t afford the cost (44%)
- Couldn’t find a provider that was easy to get to for in-person visits (42%)
- Insurance wouldn’t cover it (37%)
- Didn’t know how to find care (36%)
- Afraid or embarrassed to seek care (33%)

Next Steps

Employers are crucial in ensuring employees get the mental health care they need. Organizations that encourage workers to take time off, fund and support employee assistance programs and encourage workers to prioritize mental health throughout the workday may see numerous benefits in the form of happier and more productive employees.

For further guidance, contact us today.

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