



July 24, 2025

The Honorable Anna Caballero  
Chair, Senate Appropriations Committee  
California State Capitol, Room 412  
Sacramento, CA 95814

**SUBJECT: AB 669 (Haney) — As amended July 15 — SUPPORT**

Dear Senator Caballero:

Hospitals are on the front lines of the mental health and substance use disorder crisis in California, with as many as 1 in 3 inpatient hospitalizations and 1 in 5 emergency department (ED) visits now [involving patients with behavioral health disorders](#). When timely access to medically necessary care is delayed or denied, patients suffer and medical outcomes are compromised. Too often, these harmful delays and denials stem from health plans' utilization management practices. To ensure that Californians receive the care they need when they need it, thoughtful, comprehensive reform is essential — especially given the growing number of individuals seeking behavioral health treatment.

For these reasons, **the California Hospital Association (CHA), on behalf of nearly 400 hospitals and health systems, supports Assembly Bill (AB) 669. This bill would improve patients' access to lifesaving substance use disorder treatment — with minimal fiscal impact to the state** — by requiring commercial health plans to cover the first 28 days of outpatient, inpatient, and residential substance use disorder treatment services without conducting concurrent or retrospective review.

Every day in California hospitals, thousands of patients are stuck in the ED awaiting transfer to an appropriate setting — whether it be to a behavioral health care facility or substance use disorder treatment facility — where the resources, expertise, and trained staff are prepared to meet their unique needs. The dominant insurer-related factors in these patients' inability to transfer are authorization delays and denials.

Requiring commercial health plans to cover the first 28 days of medically necessary, in-network outpatient, residential, inpatient, partial hospitalization, or intensive outpatient therapy for substance use disorders without concurrent and/or retrospective authorization reviews, as AB 669 outlines, would save lives by getting patients the care they need when they need it. Additionally, health plans may experience operational savings from processing fewer independent medical reviews and managing fewer consumer or provider complaints. (The bill also specifies that treatments lasting longer than 28 days would undergo a concurrent and/or retrospective review and appeal process.)

Providing better substance use disorder treatment access to insured Californians at the right level of care and for the most effective duration will not only produce better patient outcomes, but will also result in savings across the health care delivery system.

**For these reasons, CHA requests your “AYE” vote on AB 669.**

Sincerely,



Kalyn Dean  
Vice President, State Advocacy, California Hospital Association

cc: The Honorable Matt Haney  
The Honorable Members of the Senate Appropriations Committee  
Agnes Lee, Consultant, Senate Appropriations Committee  
Tim Conaghan and Joe Parra, Health Policy Consultants, Senate Republican Caucus