

Agenda

P.A. 100-1024 Mental Health Parity Working Group
February 28, 2020
11:00 A.M.-12:00 P.M.

Locations:

Department of Healthcare and Family Services
401 South Clinton
7th Floor
Chicago, IL 60622

Department of Insurance
320 W. Washington
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Call-in Information:

1-312-535-8110
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- I. Welcome
- II. Introductions
- III. Mental Health Parity Overview
- IV. Working Group Objectives
- V. Deadlines
- VI. Next Steps
- VII. Adjourn

**PA 100-1024 Parity Data Workgroup
Mental Health and Substance Use Disorder Parity Overview**

What is parity in the context of behavioral health?

- Parity in health care is fundamentally grounded in ensuring mental health and addiction treatment services are covered at the same level, frequency, and availability as medical and surgical services.
- The Mental Health Parity and Addiction Equity Act (MHPAEA), in conjunction with the Affordable Care Act, requires most health insurers to cover illnesses of the brain, such as depression and addiction, no more restrictively than illnesses of other parts of the body, such as diabetes and cancer. That is, health plan's policies and practices for covering behavioral health services must be no more restrictive than policies and practices covering surgical services.

Example of Potential Parity Violations

- Separate deductibles or higher co-pays for mental health and addiction treatment services.
- More stringent limits on how many days patients can stay in a treatment facility or how many times they can see a mental health or addiction provider.
- Narrower networks or lower reimbursement for mental health and addiction providers.
- Higher costs for prescription medication for mental health and substance use disorders.
- More frequent requirements step-therapy requirements.
- Denials for mental health or addiction treatment outside of a patient's state or region.
- More frequent prior authorization requirements before starting and/or continuing treatment.

Parity in Illinois

- The Illinois Parity law is codified in in the Illinois Insurance Code §215 ILCS 5/370c and 370c.1.
- Illinois' parity law incorporates the protections of MHPAEA and contains various additional key provisions and protections.
- Examples of such provisions:
 - Coverage requirements for mental health and substance use disorders.
 - Definition of MHSUD tied to current edition of DSM and ICD.
 - Annual inpatient day limit (no less than 45 days) and outpatient day limit (no less than 60 visits)
 - Elimination of prior-authorization and step-therapy requirements for FDA approved SUD medications.
 - Only ASAM Criteria may be used for substance use disorder medical necessity determinations.
 - Non-federal government plans are subject to parity law (no opt-out).
 - Established Parity Data Workgroup to be responsible for:
 1. providing recommendations to General Assembly on health plan data reporting requirements; and
 2. developing the format and any needed definitions for the required annual report that health plans must make to IDOI/IHFS to demonstrate compliance with state and federal parity law.

