**S.B. XXX**

SENATE BILL NO. XXX—SENATORS\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_,

MARCH XX, 2019

Referred to Committee on Commerce, Labor and Energy

SUMMARY—Revises provision relating to health insurance (BDR XX-XXX)

FISCAL NOTE: Effect on Local Government: No

Effect on State: No

EXPLANATION – Matter in ***bolded italics*** is new; matter between brackets [~~omitted material~~] is material to be omitted.

AN ACT relating to insurance; specifications for reimbursement of benefits provided through the psychiatric Collaborative Care Model service delivery method.

**Legislative Counsel’s Digest:**

**Section 1** of this bill requires health carriers to that provide mental health and substance use disorder benefits to reimburse for such benefits that are provided through the psychiatric Collaborative Care Model service delivery method.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

**Section. 1.** Chapter 687B of NRS is hereby amended by adding thereto a new section to read as follows:

***1. Any health carrier that issues a health benefit plan pursuant to chapters 689A, 689B, 689C, 695A, 695B, 695C, 695G, 695F, or 287 of NRS that provides mental health or substance use disorder benefits shall provide reimbursement for such benefits that are delivered through the psychiatric Collaborative Care Model, which shall include the following current procedural terminology (CPT) billing codes established by the American Medical Association (AMA):***

***(a) 99492;***

***(b) 99493;***

***(c) 99494; and***

***(d) The Commissioner shall update this list of codes if there are any alterations or additions to the billing codes for the Collaborative Care Model.***

***2. Any health carrier that issues a health benefit plan pursuant to chapters 689A, 689B, 689C, 695A, 695B, 695C, 695G, 695F, or 287 of NRS that provides mental health or substance use disorder benefits may deny reimbursement of any CPT code listed in this section on the grounds of medical necessity, provided that such medical necessity determinations are in compliance with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 and its implementing and related regulations, and that such determinations are made in accordance with the utilization review requirements found in chapter 695G of NRS.***

***3. As used in this section:***

***(a) “Health benefit plan” has the meaning ascribed to it in NRS 695G.019.***

***(b) “Health carrier” has the meaning ascribed to it in NRS 695G.024.***

***(c) “Mental health or substance use disorder benefits” means benefits for the treatment of any condition or disorder that involves a mental health condition or substance use disorder that falls under any of the diagnostic categories listed in the mental disorders section of the current edition of the International Classification of Disease or that is listed in the mental disorders section of the most recent version of the Diagnostic and Statistical Manual of Mental Disorders.***

***(d) “The Psychiatric Collaborative Care Model” means the evidence-based, integrated behavioral health service delivery method described at 81 FR 80230.***

**Sec. 2.** This act becomes effective:

1. Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks necessary to carry out the provisions of this act; and

2. On January 1, 2020 for all other purposes.