2098 Regular Session

HOUSE BILL NO. XXX

BY REPRESENTATIVE \_\_\_\_\_\_\_\_\_\_\_

INSURANCE/HEALTH: Provides requirements for mental health parity

AN ACT

To enact R.S. 22:1066.1, relative to parity implementation requirements; to establish parity implementation requirements for the commissioner.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1066.1 is hereby enacted to read as follows:

§1066.1. Parity reporting requirements

A. The commissioner shall implement and enforce applicable provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, and any amendments to, and any federal guidance or regulations relevant to, that act, including 45 CFR 146.136, 45 CFR 147.136, 45 CFR 147.160, and 45 CFR 156.115(a)(3), includes:

(1) Proactively ensuring compliance by insurers or other issuers of health coverage plans.

(2) Evaluating all consumer or provider complaints regarding mental health and substance abuse coverage for possible parity violations.

(3) Performing parity compliance market conduct examinations of insurers or other issuers of health coverage plans, particularly market conduct examinations that focus on nonquantitative treatment limitations such as prior authorization, concurrent review, retrospective review, step-therapy, network admission standards, reimbursement rates, and geographic restrictions, among other nonquantitative treatment limitations.

(4) Requesting that insurers and other issuers of health coverage plans submit comparative analyses during the form review process demonstrating how they design and apply nonquantitative treatment limitations, both as written and in operation, for mental health and substance abuse benefits as compared to how they design and apply nonquantitative treatment limitations, as written and in operation, for medical and surgical benefits.

(5) The Commissioner may adopt rules, under R.S. 22:11, as may be necessary, to effectuate any provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 that relate to the business of insurance.

B. Not later than March 31st, 2020, the commissioner shall issue a report and educational presentation to the Legislature, which shall contain the following:

(1) Cover the methodology the commissioner is using to check for compliance with the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), and any federal regulations or guidance relating to the compliance and oversight of MHPAEA.

(2) Identify market conduct examinations conducted or completed during the preceding 12-month period regarding compliance with parity in mental health and substance abuse benefits under state and federal laws and summarize the results of such market conduct examinations.

(3) Detail any educational or corrective actions the commissioner has taken to ensure insurer or other issuers of health coverage plans compliance with MHPAEA.

(4) The report must be written in non-technical, readily understandable language and shall be made available to the public by, among such other means as the commissioner finds appropriate, posting the report on the Internet website of the Department of Insurance.

C. As used in this section:

(1) "Health coverage plan" means any hospital, health, or medical expense insurance policy, hospital or medical service contract, employee welfare benefit plan, contract or agreement with a health maintenance organization or a preferred provider organization, health and accident insurance policy, or any other insurance contract of this type, including a group insurance plan and the Office of Group Benefits programs.

(2) “Mental health or substance abuse 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.

(3) “Nonquantitative treatment limitations” means limitations that are not expressed numerically, but otherwise limit the scope or duration of benefits for treatment, as expressed at 45 CFR 146.136(c)(4)(ii).