AGENDA

- WELCOME
- WHAT IS PARITY?
- SIGNS OF PARITY PROBLEMS
- PARITY BILLS IN MISSOURI
- STORIES: PARITY PROBLEM OR NOT?
- PRACTICE EMAILING YOUR POLICY MAKER
- RESOURCES
GROUND RULES

- Participate fully
- Help keep us on time
- Stay on mute
- Use the chat
WHAT IS PARITY?

MENTAL HEALTH OR SUBSTANCE USE TREATMENT MUST BE COVERED BY HEALTH INSURANCE AT THE SAME LEVEL AS OTHER TYPES OF MEDICAL CARE

- TREATMENT LIMITS
- OUT OF POCKET COSTS
- REVIEW FOR TREATMENT APPROVAL
PARITY IS REQUIRED BY FEDERAL LAW FOR MOST TYPES OF HEALTH PLANS
MAJOR PARITY LAWS

2008
MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT (MHPAEA)

2010
THE PATIENT PROTECTION AND AFFORDABLE CARE ACT (ACA)

2016
21ST CENTURY CURES ACT
MENTAL HEALTH PARITY & ADDICTION EQUITY ACT (MHPAEA)

- **LARGE EMPLOYER SPONSORED HEALTH PLANS**
  - 50+ Employees
  - Includes self-insured
- **MEDICAID MANAGED CARE PLANS**
- **PLANS NOT REQUIRED TO OFFER MH OR SU BENEFITS**
- **ANY MH OR SU MUST BE AT SAME LEVEL AS OTHER TYPES OF CARE**
PATIENT PROTECTION & AFFORDABLE CARE ACT (ACA)

- CONSUMER PROTECTIONS
- EXTENDS PARITY TO:
  - ALL INDIVIDUAL AND SMALL GROUP HEALTH PLANS
  - MEDICAID EXPANSION ALTERNATIVE BENEFIT PLANS
  - CHILDREN'S HEALTH INSURANCE PLANS (CHIP)
- MEDICAID ELIGIBILITY - 138% OF POVERTY
- INSURANCE EXCHANGES / FEDERAL MARKETPLACE
- 10 ESSENTIAL HEALTH BENEFITS
  - INCLUDES MH/ SUD BENEFITS
  - ALL EHB CATEGORIES MUST MEET PARITY
WHY IS PARITY STILL A PROBLEM?
21ST CENTURY CURES ACT

- Broad Research & Health Service Law
- Enforces Parity:
  - Guidance on how plans should comply
  - Meeting to improve Federal/State parity enforcement
  - Annual report on parity complaints
  - Government Accountability Office (GAO) study
    - Non-quantifiable treatment limits (NQTL)
    - How to improve enforcement
  - Resources on parity for eating disorder treatment
PARITY EXCEPTIONS

- Medicare
- Medicaid Fee For Service
- State and Local Government Plans
- Faith-Based Health Plans
- Retiree Only Plans
- Tricare
- Grandfathered Plans
  - Small group (2 - 50 employees)
  - Individual
  - Purchased before 2010 & unchanged
PARITY = SAME LEVEL

- Inpatient Care/ Outpatient Care
  - In-Network
  - Out-Of-Network
- Residential Treatment
- Emergency Care
- Prescription Drugs
- Co-Pays / Deductibles
- Out of Pocket Cost Limits
- Providers in Local Area
- Facility Type
- Provider Payment Rates
- Standards for Approving or Denying Care
WHAT ARE SIGNS THAT A HEALTH PLAN MAY NOT BE FOLLOWING PARITY LAW?
NO PARITY

1. FEWER VISITS
   IN-PATIENT, OUT-PATIENT, QTL.

2. HIGHER COSTS
   OUT OF POCKET, CO-PAYS AND CO-INSURANCE

3. COVERAGE DENIED OR PERMISSION NEEDED
   NQTL, AND PA

4. NO PROVIDERS
   LACK OF IN-NETWORK PROVIDERS FOR MH OR SUD
HOW DO I ADVOCATE FOR PARITY IN MISSOURI?
MISSOURI MENTAL HEALTH PARITY BILLS:
SENATE BILL 80/ HOUSE BILL 383
TIPS FOR TELLING YOUR STORY

BE BRIEF
JUST ENOUGH EMOTION
HOPE & RECOVERY
ASK !!
PRACTICE YOUR EMAIL