

## **Agenda**

P.A. 100-1024 Mental Health Parity Working Group

June 26, 2020

11:00 A.M.-12:00 P.M.

### **Locations:**

CALL-IN ONLY

### **Call-in Information:**

1-312-535-8110

Code: 133 145 0643

- I. Welcome
- II. Introductions
- III. Minutes
- IV. Mental Health Parity Overview
- V. Working Group Objectives
- VI. Deadlines
- VII. Next Steps
- VIII. Adjourn

## **Meeting Minutes**

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  
7<sup>th</sup> Floor  
Chicago, IL 60622

Department of Insurance  
320 W. Washington  
4<sup>th</sup> Floor  
Springfield, IL 62767

### **Call-in Information:**

1-312-535-8110  
Code: 802 405 373

## I. Welcome

## II. Introductions

- Members in Attendance:
  - Lia Daniels
  - Britton Carlson
  - Robert Edstrom
  - Cheryl Potts
  - Jud DeLoss
  - Greg Lee
  - Nancy Wolhart
  - Samatha Olds-Frey
  - Laura Minzer
- Members Absent:
  - Tina Cortez
- Guests in Attendance:
  - David Applegate
- Facilitators:

- Department of Insurance
- Department of Human Services

### III. Mental Health Parity Overview

- Jud DeLoss presented an overview on parity in the context of behavioral health. He mentioned that parity in health care is fundamentally grounded in ensuring that mental health and addiction treatment services are covered at the same level, frequency, and availability as medical and surgical services. Jud DeLoss gave examples of potential parity violations, which include but are not limited to: 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, and more frequent requirements for step-therapy requirements.

### IV. Working Group Objectives

- The Department of Insurance (DOI) briefed the Working Group on the objectives and responsibilities of the Working Group.
- The Department, in coordination with HFS, shall convene and provide technical support to a workgroup of 11 members:
  - a. 3 mental health parity experts recommended by an organization advocating on behalf of mental health parity appointed by the President of the Senate
  - b. 3 behavioral health providers recommended by an organization that represents behavioral health providers appointed by the Speaker of the House of Representatives
  - c. 2 representing Medicaid Managed Care organizations recommended by an organization that represents Medicaid managed care organizations appointed by the Minority Leader of the House of Representatives
  - d. 2 representing commercial insurers recommended by the organization that represents insurers appointed by the Minority Leader of the Senate
  - e. 1 representative or an organization that represents Medicaid Managed Care plans appointed by the Governor.
- The workgroup will provide recommendations to the GA on health plan data reporting requirements that separately break out data on mental, emotional, nervous, or substance use disorder or condition benefits and data on medical benefits, including physical health and related health services by December 31, 2019.
- The recommendations should be filed with the Clerk of the House and the Secretary of the Senate in electronic form.
- Research and analysis provided by the workgroup must include:
  - a. Claims denials due to benefit limits
  - b. Administrative denials for no prior authorization
  - c. Denials for not meeting medical necessity
  - d. Denials that went to external review
  - e. Out of network claims
  - f. Emergency care claims
  - g. Network directory providers in the outpatient benefits classification who filed no claims in the last 6 months.
  - h. Impact of existing limitations and restrictions related to approved services, licensed providers, reimbursement levels
  - i. When reporting and publishing should begin

- 

## V. Deadlines

- DOI mentioned that the Working Group deadline had passed. However, the Working Group should keep working at a steady pace to achieve the objectives in statute
- Samantha Olds-Frey mentioned that she has mapped out directives and next steps. Samantha noted that definitions should be tight on the front end to avoid any disruption after collecting data.
- There was conversation on what plans are not included in data collections. The only plans not included in data collections are self-insured plans.
- There was conversation that the next meeting should task the Working Group to walk through each definition and create a narrative to explain the interpretation of each definition.
- There was conversation on a Kennedy Forum Bill that is currently filed in the Senate establishing a deadline for the objectives of the Working Group to be May 31, 2020. Some members of the group mentioned that this deadline is aggressive due to the massive data collection from the plans. The May 31<sup>st</sup> deadline doesn't leave much room to have the carriers collect the data and the Working Group analyze it.
- Laura Minzer asked if Kennedy Forum would be willing to move the industry deadline to comply with the forum the Working Group will produce to Jan 1, 2021. This will give insurance companies enough time to properly comply with the work product created.

## VI. Next Steps

- Kennedy Forum will send New York and Pennsylvania templates to the Working Group. The Working Group will then send feedback to Group by March 17, 2020 close of business.

## VII. Adjourn

- The Meeting adjourned at 11:54 AM.