



Illinois Department of Insurance

PAT QUINN
Governor

ANDREW BORON
Director

TO: ALL INSURERS
FROM: ANDREW BORON, DIRECTOR OF INSURANCE *AB*
DATE: May 15, 2014
RE: COMPANY BULLETIN CB 2014 - 06
MENTAL HEALTH PARITY AND PREVENTION

The Patient Protection and Affordable Care Act (ACA) expands requirements for coverage of clinical preventive services under Medicare, Medicaid, and in the private insurance market. The purpose of this Bulletin is to remind all insurance companies doing business in Illinois of both the prevention and parity requirements and request each issuer to inform the Department of Insurance of their coverage of evidence-based clinical preventive services.

Prior to the ACA, federal law did not require group health plans and health issuers to cover preventive services. Within six months of enactment of the ACA (September 23, 2010), group health plans and health insurance issuers in the group and individual markets were required to cover specified evidence-based clinical preventive services, without any cost sharing. This includes coverage of preventive care under four broad categories: evidence-based screenings and counseling, routine immunization, childhood preventive services, and preventive services for women. Health plans in existence when the ACA was enacted are "grandfathered" under the law and are exempt from this requirement.

Additionally, the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) requires the integration of mental health and substance abuse disorder coverage with medical coverage. Specifically, when a benefit related to mental health or substance abuse disorders is covered, it must be covered at parity with other medical conditions.

The ACA requires plans to cover any evidence-based items or services that have an 'A' or 'B' rating in the current recommendations of the United State Preventive Services Task Force (USPSTF). For example, as of April 30, 2009, the USPSTF recommends with an 'A' rating that, clinicians screen all adults for tobacco use and provide tobacco cessation interventions for those who use tobacco products. The USPSTF indicates that, "combination therapy with counseling and medications is more effective than either [counseling or pharmacotherapy] alone." Insurers should inform the Department of their coverage of evidence based clinical services with a USPTF rating of A or B, as well as utilization management and cost-sharing provisions, if any, for plans submitted for the 2015 plan year.