WORKING GROUP

Regarding
Treatment & Coverage of Substance Abuse Disorders & Mental Illness

July 26, 2017
AGENDA

• Welcome & Introductions

• Review & Approval of Minutes

• Overview of Illinois Department of Insurance (IDOI)
  Compliance & Complaints Process
  Consumer Education Initiatives
WHY IDOI’S PROCESS IS IMPORTANT?

According to the World Health Organization, mental disorders increase the risk of physical illness, such as cardiovascular disease and diabetes.

Suicide is the 3rd leading cause of death in the US and 8.6 million adults have suicidal thoughts, according to the Center for Behavioral Health Statistics.

Children with anxiety disorders are least likely to receive treatment, developing long-term trauma according to the Presidential Task Force on Posttraumatic Stress Disorder and Trauma in Children and Adolescents.

Roughly 20% of children and adolescents suffer from mental illness, according to the Presidential Task Force on Posttraumatic Stress Disorder and Trauma in Children and Adolescents.

Drug overdose deaths in the U.S. have tripled from 1999 to 2014.

According to the Illinois Department of Human Services, of the 2,278 Illinois statewide drug overdose deaths during 2016, over 80% (1,826) were opioid related deaths.

Advancing Parity, Achieving Healthier Outcomes
A group health plan and a health insurance issuer offering health insurance coverage in the group or individual market must ensure that MH/SUD restrictions and limitations are no more restrictive than the predominant requirements or limitations applied to substantially all (Medical/Surgical) benefits.

- Mental Health Parity Act of 1996
- The Mental Health Parity & Addiction Act of 2008
- Illinois Mental Health Parity Law provisions of P.A. 97-437; P.A. 99-0480
HOW IDOI IS ADVANCING PARITY IN ILLINOIS?

- Compliance Process
- Consumer Complaints process
- Public Education
Understand Your Current Health Insurance Coverage and Benefits

Health Plans that generally must equally cover physical health treatment and mental health and substance use disorder treatment:

- Group health plans for employers with 51 or more employees.
- Most group health plans for employers with 50 or fewer employees unless they have been “grandfathered,” meaning the plan was in place before the federal parity laws.
- The Federal Employees Health Benefits Program.
- Medicaid Managed Care Plans (MCOs).
- State Children’s Health Insurance Programs (All Kids).
- Some state and local government health plans.
- Any health plans purchased through the Health Insurance Marketplace.
- Most individual and group health plans purchased outside the Health Insurance Marketplace unless “grandfathered”.
WHAT IDOI REGULATES FOR MENTAL HEALTH PARITY:

Off-Exchange*-

- Fully Insured Illinois Individual Plans
- Fully Insured Illinois Large Group Plans (51+ employees)
- Fully Insured Illinois Small Group Plans (2-50 employees)

On-Exchange-

- Small Employer Group & Individual plans

* (Excluding Grandfathered and Transitional Plans, meaning those in place before March 23, 2010 that have not changed.)
IDOI IS ADVANCING PARITY, ACHIEVING HEALTHIER OUTCOMES

COMPLIANCE

Our Compliance Analysts review policy form filings, including schedules of benefits and all advertising and wellness programs, to ensure compliance with both State and Federal insurance laws.

COMPLAINTS

Our Consumer Health Complaints Analysts handle most consumer insurance problems involving health, HMO, dental, etc. Typical consumer complaints include: coverage issues, claim disputes, premium problems, sales misrepresentations, policy cancellations, and refunds, just to name a few.
**COMPLIANCE PROCESS**

**STEP 1:**
Insurance Company submits filing to IDOI.

**STEP 2:**
The filing is assigned to an analyst.

**STEP 3:**
The analyst identifies any mental health/substance use language within the filing and examines:
- Financial Requirements
- Treatment Limitations
- Quantitative Limitations
- Non-Quantitative Limitations

**STEP 4:**
Compliant vs. Non-Compliant Policy

**STEP 5:**
Insurance company corrects deficiencies and resubmits filing for review.

If information appears out of compliance with legislation, objection letter is sent allowing company 2 weeks to respond.

Filing moves through the IDOI’s Compliance Process, Marked ‘awaiting final approval’ and sent to Assistant Deputy Director for review and approval.
WHAT IDOI LOOKS FOR WHEN REVIEWING PLANS FOR PARITY?

- Quantitative Limitations
- Non-Quantitative Limitations
- Financial Requirements
- Treatment Limitations
- Regulation
- Applicability
# WHAT IDOI LOOKS FOR WHEN REVIEWING PLANS FOR PARITY?

## Financial Limitations:
- Deductibles
- Co-pays
- Co-insurance
- Out-of-Pocket maximums
- No separate accumulating accruals (M/S and MH/SUD deductible are the same)

## Treatment Limitations:
- Type of quantitative treatment limits:
  - Annual, episode, lifetime, day, and visit maximums
- Preauthorization limitations
- Generic vs. brand name
- Mail order vs. pharmacy pick-up
WHAT DOES IDOI LOOK FOR WHEN REVIEWING PLANS FOR PARITY?

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<thead>
<tr>
<th>Quantitative Limitations</th>
<th>Non-Quantitative Limitations</th>
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<tbody>
<tr>
<td>· Number of visits</td>
<td>· Medical necessity</td>
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<tr>
<td>· Days of coverage</td>
<td>· Rx drug formulary design</td>
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<td>· Days in waiting period</td>
<td>· Standards for participating in a network, including reimbursement</td>
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<td>· Frequency of treatment</td>
<td>· Reimbursement rates</td>
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<td>· Step therapy protocols</td>
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<td>· Network adequacy</td>
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COMPLIANCE CHECKLISTS & TOOLS

Checklist

http://insurance.illinois.gov/LAH_HMO_IS3_Cheklists/LAH-Checklist.html

Fact Sheet

http://insurance.illinois.gov/healthInsurance/consumerHealth.html
STEP 1:
Complaint intake and sorting:
IDOI receives inquiries via mail, fax, email, walk-ins, secure message center, and the External Review process.

STEP 2:
IDOI intake staff assigns the inquiry to a complaint analyst.

STEP 3:
The analyst reads and interprets the complaints.

STEP 4:
Analyst notifies the insurer of the consumer inquiry & issue and issues 21-day response time.

STEP 5:
Insurer sends IDOI rebuttal or inquiry resolved.

STEP 6:
Analyst sends consumer an acknowledgement of receipt of consumer inquiry & alerts the consumer of the 21-day response time granted to the insurer.

STEP 7:
The consumer may request an External Review for medical necessity or experimental services denials.

STEP 8:
Analyst informs consumer and marks inquiry for closure.
**EXTERNAL REVIEW PROCESS**

**STEP 1:**
External review intake and sorting.

**STEP 2:**
IDOI intake staff assigns the inquiry to an analyst.

**EXTERNAL REVIEW APPROVED:**
Analyst notifies consumer of External Review.
Analyst assigns to an Independent Review Organization.
Analyst notifies the insurer of the External Review & the appropriate timeline - 7 days for standard, 24 hours for expedited review.

**STEP 3:**
Analyst reads and interprets External Reviews.

**EXTERNAL REVIEW DENIED:**
Analyst sends consumer a letter advising why request for external review denied.

**STEP 4:**
IRO conducts review and responds to IDOI according to appropriate timeline.
- 21 days for standard,
- 72 hours – 5 days for Expedited Standard/Experimental Investigational

**STEP 5:**
Analyst reviews the IRO’s decision to ensure accuracy and appropriateness.

**STEP 6:**
Analyst informs the insurer of the outcome.
Analyst informs the consumer of the outcomes.
Analyst closes file.

*External Review for Medical Necessity & Experimental Services Denials.*
PUBLIC EDUCATION REVIEW

2016
- Established the OCHI Hotline
- Internal Training
- Consumer Toolkit
- Consumer Education Campaign on Parity for Behavioral Health Services

2017
- Commercial Parity Policy Academy
- Substance Abuse and Mental Health Services Administration (SAMHSA) coach
- Public Awareness and Education Committee
PUBLIC EDUCATION UPDATES

- Consumer Health Protection Community Affairs Liaison

- Health Insurance Enforcement and Consumer Protections Grant
PUBLIC EDUCATION & OUTREACH

- Direct Consumer Messaging
  - Presentations/Tabling
  - Fact Sheets
  - Digital Messaging
- Navigators & Certified Applications Counselors
- Stakeholders/Elected Officials
- Providers
- Insurance Carriers
OUTREACH

Scheduled through October 15, 2017

Completed

4,685

17,359

82,557
DISCUSSION

• What are some additional ways to engage the public regarding parity education?

• What other resources are available to assist in this effort?

• Next steps for action