



COLORADO

Mental Health Parity Enforcement: Presentation to the Joint Health Committees

Colorado Division of Insurance

January 18, 2024



Agenda

- Overview of Mental Health Parity
- 2023 Enforcement Activity
- New Provider Resources





Introduction

- Insurance Coverage:
 - Commercial vs. ERISA vs. Public
 - CO-DOI
- HB19-1269

Insurance Company Name

Subscriber Name:	JOHN DOE	OV/Specialist	\$\$/\$\$
Identification Number:	AB123456789	Emergency Room	\$\$\$
		Urgent Care	\$\$
		RX Generic Copay	\$\$
Group Number:	123456	RX Brand Min/Max	\$\$/\$\$\$
Coverage Date:	00/00/00	RxBIN: 000000	
		RXPCN: ABCD	

CO-DOI  

www.website.com



Insurance Company Name

Network coverage is available through participating network providers. Non-network services will be covered at a lower level. Some services will be pre-authorized, including Mental Health (MH) and Chemical Dependency (CD). Refer to your benefits booklet for claims filing address and additional information.

Customer Service	1-000-000-0000
Pre-Authorization	1-000-000-0000



What is Mental Health Parity?

The comparability of mental health and substance use disorder (SUD) coverage to medical and surgical care coverage.*

(IE: A qualified health plan cannot make it more difficult or expensive to see a therapist than an outpatient primary care doctor.)

***Mental Health Parity and Addiction Equity Act / MHPAEA
Federal Parity Law / Mental Health Parity / Parity***

**Language: Behavioral Health/Mental Health/SUD, Physical Health/Medical/Surgical*

2023 Enforcement: Cost of Care and Coverage

Financial Requirements Violations:
Companies overcharging consumers in cost-share in PY2020

How many people were overcharged?	More than 800 Coloradans
How much money did they get back?	Up to \$2,000 per person Total \$115,000 restitution
How many companies were in violation?	6
How much were the companies fined?	\$15,000 to \$321,000 per carrier Total \$510,000



2023 Enforcement: Network Adequacy

Colorado Insurance Regulation [4-2-53 Network Adequacy Standards and Reporting Requirements for ACA-Compliant Health Benefit Plans](#)

- **Metrics: Provider to Enrollee Ratios & Time and Distance Standards**
 - Initial and Follow-Up Apts: Non-Emergency Behavioral Health, Mental Health and SUD
 - Within 7 calendar days each (met \geq 90% of the time)
- **If all the providers in the insurer's network are not taking new patients, the consumer can go out of network at the in-network rate. Contact the insurance company to learn how.**
- **Regulation Changes: Effective 6/30/23**
 - Clarifies and makes more explicit the definition of mental health, behavioral health, and SUD providers
 - Adjusts certain metrics and bifurcates mental health and SUD providers
 - Expands behavioral health provider types in time and distance standards



Provider Experience: New Tools

- [DOI Bulletin B-4.131](#): Streamline and clarify carrier credentialing processes
- [Public information](#) on carrier policies regarding billing and reimbursement for pre-licensure clinicians
 - Lists carrier requirements regarding delegated, provisional, and pre-license candidate network admission

Pre-Licensure, Provisional, and Delegated Credentialing Practices: Plan/Filing Year 2023 Insurance Company Response Summary

The DOI issued [Bulletin B-4.131](#) directing Colorado insurance companies to adopt credentialing standards that clarify policies, expedite the process and reduce unnecessary administrative burdens for behavioral health providers. Companies were also strongly encouraged to allow pre-license, provisional, and delegated behavioral health provider candidates to bill for patient care, an approach that can increase the number of available, in-network providers and improve Coloradans' access to behavioral health care. In addition, the DOI requested information from insurance companies about their credentialing and billing policies for behavioral health providers. Below is a summary of the insurance companies' responses.





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Commercial Insurance Resources for Behavioral Health Providers in Colorado

The Colorado Division of Insurance has received complaints from providers related to their ability to participate in insurance carriers' health benefit plan networks and from consumers regarding their ability to receive care from in-network behavioral health, mental health, and substance abuse disorder providers within required timeframes, reporting waiting up to 90 days at times to seek behavioral health care from an in-network provider. It offers the following resources to provide insight to behavioral health providers offering services in commercial networks in Colorado.

[Frequently-Asked-Questions \(FAQs\): Behavioral Health Provider Resource for Commercial Insurance in Colorado](#)

Providers can submit information regarding complaints or issues with carriers related to behavioral health services to: Dora_bh_provider_issues@state.co.us

Questions

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