

The following message was sent on behalf of Dr. Saul Levin, APA CEO and Medical Director late this week:

*On March 26, 2016, President Obama established a White House Task Force on Mental Health Parity which was charged with reviewing how parity is being implemented and making recommendations for improvements so that mental health and substance use disorder patients are no longer discriminated against in access to care. The Task Force began their work with a hearing at APA's 2016 Annual Meeting where APA members relayed to the Task Force their experiences in trying to treat their patients and pointed out parity violations they see on a daily basis. These included discriminatory prior authorization requirements, unfair utilization reviews that resulted in higher denial rates for mental health than for medical/surgical claims, poor reimbursement rates, unfair contract terms, and the inability to obtain information from insurers which would allow them to determine whether the parity laws had been violated. Since then, APA has actively participated in a consulting group to the Task Force and followed up with formal comments and recommendations.*

*Today, the White House Task Force on Mental Health Parity issued its final report. As a result of the findings, the federal government is taking the following actions:*

- Addressing network adequacy issue by developing lists of "warning signs" that would suggest parity issues in networks;*
- Providing education, tool kits and funding to the states to assist with parity enforcement;*
- Launching a complaint website to assist consumers with parity complaints and appeals;*
- Producing a Consumer Guide to Disclosure Rights;*
- Reporting publicly on parity investigations and their results; and*
- Issuing guidance on parity for opioid use disorder treatment.*

*The Task Force also asked Congress to:*

- Increase funding so it can conduct random parity audits of health plans;*
- Permit the Department of Labor to assess civil penalties against non-compliant plans;*
- Extend disclosure requirements to non-ERISA Plans; and*
- Eliminate the ability of state funded plans to opt out of the Mental Health Parity and Addiction Equity Act (MHPAEA).*

*The Department of Labor issued additional FAQs which address issues raised by our members at the Annual Meeting, including confirming that it violates MHPAEA to:*

- Require a plan representative to examine an individual in person to determine whether in patient treatment is necessary for mental health conditions while medical/surgical prior authorizations are done over the phone;*
- Require prior authorization for buprenorphine because of safety concerns when similar prior authorization is not required for medical/surgical drugs that has similar safety concerns; and*
- Require a patient to fail first at non-pharmacological treatments before approving coverage of buprenorphine when it does not require similar fail first requirements on other prescription drugs offered by the plan for medical/surgical conditions.*

*In addition, the Substance Abuse and Mental Health Services Administration (SAMHSA) issued a guide to the materials that health plan participants are entitled to receive from their insurers. It verifies that beneficiaries are entitled to detailed information about how the health plan makes decisions on the mental health and on the medical surgical sides of the plan. With broad disclosure, patients will have a much better chance of succeeding in their appeals.*

*Thank you for your help collecting the information we needed to bring attention to mental health parity violations. We could not have done this without your hard work and dedication. APA will continue to work on ensuring that the Task Force recommendations are adopted and implemented by Congress and the White House, as well as continuing to monitor and push full parity implementation across the country. I would like to also thank Colleen Coyle, JD, Irvin "Sam" Muszynski, JD, Maureen Bailey, JD, Bea Eld, and Nevena Minor for their continued efforts on behalf of the APA Administration.*