



## **Support Mental Health Parity in Connecticut**

## **Defining Mental Health Parity**

Federal parity laws require most health insurance plans that offer mental health and addiction benefits to do so on par with medical and surgical benefits, preventing them from applying financial requirements and treatment limitations to mental health and addiction benefits that are more restrictive than those applied to medical and surgical benefits. Plan provisions that are subject to parity laws include provisions like network inclusion criteria for providers, medical necessity criteria for treatment, and co-pays and visit limitations for patients.

These laws, passed in 2008 and expanded in 2010, apply to most commercial and all Medicaid managed care plans in the United States. State insurance commissioners and Medicaid directors have the authority to enforce parity laws but often face difficulties fully enforcing them. Consequently, consumers still face barriers in receiving mental health benefits at parity.

## **Connecticut is Falling Behind in Parity**

Many Connecticut consumers continue to face difficulty finding less expensive, in-network mental health and substance abuse providers and cannot get approval for the full range of needed services as recommended by their therapists, doctors or treatment team.

In 2017, a study<sup>1</sup> examined all 50 states to determine the level of utilization of out-of-network providers for mental health and substance use disorder services and the reimbursement rates for those services. The study found that **Connecticut performed worse than most other states in all aspects of the examination.** 

According to the study, Connecticut adults seeking behavioral health care were 11 times more likely to use out-ofnetwork providers than those seeking primary care. In addition, primary care providers were paid up to 22% higher rates for office visits than behavioral health providers, often while using the same billing codes. Both of these findings illustrate the impact that disparity between behavioral health and medical care has on health care costs and the availability of services.

The Connecticut General Assembly has previously considered bills to strengthen parity at the state level through proposals to expand reporting requirements for the CT Department of Insurance, expand data points to be included in the Consumer Report Card, and add screenings for certain mental health conditions to patients' annual physicals. Unfortunately, no such bill has yet been passed in Connecticut.

## Why Does Parity Matter to Connecticut?

The promise of parity has not yet been fully realized in Connecticut, and when individuals cannot access or afford services, their conditions worsen, costs of care increase, and the state suffers from productivity losses. Enforceable parity law is one way to ensure that health plans are playing an active role in guaranteeing timely access to appropriate behavioral health care and addiction treatment services.

<sup>&</sup>lt;sup>1</sup> Melek, S. P., Perlman, D., and Davenport, S. (2017). Addiction and mental health vs. physical health: Analyzing disparities in network use and provider reimbursement rates. A Milliman Research Report. Retrieved from <a href="http://www.milliman.com/uploadedFiles/insight/2017/NQTLDisparityAnalysis.pdf">http://www.milliman.com/uploadedFiles/insight/2017/NQTLDisparityAnalysis.pdf</a>