



HB 443 - Interested Party Testimony
House Health Committee
November 10, 2020

Chairman Lipps, Vice Chairman Holmes, Ranking Member Boyd, and Members of the House Health Committee:

Thank you for the opportunity to submit written interested party testimony on HB 443. The Ohio Association of Health Plans (OAHP) is the state's leading trade association representing the health insurance industry. OAHP's member plans provide health benefits to more than 9 million Ohioans through employer-sponsored coverage, the individual insurance market, and public programs such as Medicare, Medicaid, and the Federal Insurance Marketplace. Our members offer a broad range of health insurance products to Ohioans in the commercial marketplace and are committed partners in public programs.

OAHP supports the efforts in HB 443 to align Ohio laws with the federal Mental Health Parity and Addiction Equity Act (MHPAEA). However, our members do not support the provisions in HB 443 that go beyond what is required in MHPAEA.

MHPAEA requires health plans that offer mental health and substance use disorder (MH/SUD) benefits to offer those benefits on par with medical and surgical benefits. What does this mean?

- Out-of-pocket costs and quantitative treatment limitations for MH/SUD benefits are on par with and no more restrictive than the out-of-pocket costs and quantitative treatment limitations for medical and surgical benefits the health plan offers.

For example, a health plan cannot impose visit limits on MH/SUD benefits that are more restrictive than those applied to medical and surgical visits in the same benefit classification.

- The processes, strategies, evidentiary standards, or other factors used in applying non-quantitative treatment limitations to MH/SUD benefits in a benefit classification must be comparable to, and applied no more stringently than, those used in applying non-quantitative treatment limits to medical and surgical benefits in the same benefit classification.

For example, if a health plan follows professionally recognized treatment guidelines when applying prior authorization to inpatient medical services, the plan must also follow professionally recognized treatment guidelines when applying prior authorization to inpatient MH/SUD services.

As noted, however, some of the language in HB 443 goes above what is required in MHPAEA:

- Report Made by Health Plan Issuers – MHPAEA does not require health plans to report the identified elements to state regulators. Health plans must file their products with the Ohio Department of Insurance to ensure compliance with both state and federal law, including compliance with MHPAEA.
- Prescription Drug Requirements for Medications Prescribed for the Treatment of a Substance Use Disorder – The language within the bill that prohibits health plans from utilizing prior authorization and step therapy as well as requirements on the tiering of those drugs exceed MHPAEA.

HB 443 also requires the Ohio Department of Insurance and Ohio Department of Medicaid to produce reports on MHPAEA compliance. It is important to note that the ODI and ODM are already required to produce reports regarding MHPAEA compliance. Those reports can be found at the following links.

- Ohio Department of Insurance –
<https://insurance.ohio.gov/static/Consumer/Documents/MHP+Report+2019.pdf>
- Ohio Department of Medicaid –
<https://medicaid.ohio.gov/Portals/0/Providers/OH-MHPAEA- Final-Report.pdf>

OAHPP supports efforts of the Ohio Department of Insurance and RecoveryOhio to propose an amendment to SB 284, which would streamline that bill to codify the MHPAEA. That amendment (AM 133-3374) would:

- Require each health plan issuer and health benefit plan subject to the federal MHPAEA to comply with all applicable requirements of that act;
- Require the Superintendent of Insurance to implement and enforce, proactively ensure compliance with, and evaluate insurance-related complaints regarding that act;
- Require all Medicaid managed care organizations subject to the federal MHPAEA to comply with all applicable requirements of that act;
- Require the Medicaid Director to implement and enforce that requirement with respect to Medicaid enrollees and to enforce, monitor compliance with, and ensure continued compliance with that requirement by Medicaid managed care organizations;

- Permit the Medicaid Director to adopt rules as necessary to enforce the bill's Medicaid provisions; and
- Remove the provisions of the bill that exceed the scope of the MHPAEA.

OAHP recommends that HB 443 be amended in this same way.

Thank you for the opportunity to share this information. OAHP supports the primary mission of aligning Ohio law with MHPAEA. We respectfully request that the bill be amended to codify MHPAEA and remove the provisions that go beyond MHPAEA. This would allow OAHP to fully support the bill and join other stakeholders in a collaborative effort to move HB 443 forward. We look forward to working together on this very important issue.