HOUSE BILL NO. 5620

March 12, 2020, Introduced by Reps. Love, Calley, Cynthia Johnson, Brann and Whiteford and referred to the Committee on Health Policy.

A bill to amend 1980 PA 350, entitled "The nonprofit health care corporation reform act," (MCL 550.1101 to 550.1704) by adding section 414c.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 414c. (1) By March 1, 2021, and each March 1 after that
- 2 date, a health care corporation shall submit a report to the
- 3 director of the department of insurance and financial services that
- 4 includes all of the following information:
 - (a) For each classification of benefits, identification of all



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- 1 financial requirements and quantitative treatment limitations that
- 2 are applied to mental health and substance use disorder benefits
- 3 and medical and surgical benefits, and a description of the process
- 4 of how the insurer assesses that each financial requirement and
- 5 quantitative treatment limitation is not more restrictive for
- 6 mental health and substance use disorder benefits than for the
- 7 predominant financial requirement or quantitative treatment
- 8 limitation of that type that is applied to substantially all
- 9 medical and surgical benefits.
- 10 (b) A description of the process used to develop or select the
- 11 medical necessity criteria for mental health and substance use
- 12 disorder benefits and the process used to develop or select the
- 13 medical necessity criteria for medical and surgical benefits.
- 14 (c) Identification of all nonquantitative treatment
- 15 limitations that are applied to both mental health and substance
- 16 use disorder benefits and medical surgical benefits within each
- 17 classification of benefits.
- 18 (d) The results of an analysis that demonstrates that for the
- 19 medical necessity criteria described in subdivision (a) and for
- 20 each nonquantitative treatment limitation identified in subdivision
- 21 (b), as written and in operation, the processes, strategies,
- 22 evidentiary standards, or other factors used in applying the
- 23 medical necessity criteria and each nonquantitative treatment
- 24 limitation to mental health and substance use disorder benefits
- 25 within each classification of benefits are comparable to, and are
- 26 applied no more stringently than, the processes, strategies,
- 27 evidentiary standards, or other factors used in applying the
- 28 medical necessity criteria and each nonquantitative treatment
- 29 limitation to medical and surgical benefits within the



- 1 corresponding classification of benefits. At a minimum, the results
- 2 of the analysis under this subdivision must do all of the
- 3 following:
- 4 (i) Identify the factors used to determine that a
- 5 nonquantitative treatment limitation will apply to a benefit,
- 6 including factors that were considered but rejected.
- 7 (ii) Identify and define the specific evidentiary standards
- 8 used to define the factors and any other evidence relied on in
- 9 designing each nonquantitative treatment limitation.
- 10 (iii) Provide the comparative analyses, including the results of
- 11 the analyses, performed to determine that the processes and
- 12 strategies used to design each nonquantitative treatment
- 13 limitation, as written, and the as-written processes and strategies
- 14 used to apply the nonquantitative treatment limitation to mental
- 15 health and substance use disorder benefits are comparable to, and
- 16 are applied no more stringently than, the processes and strategies
- 17 used to design each nonquantitative treatment limitation, as
- 18 written, and the as-written processes and strategies used to apply
- 19 the nonquantitative treatment limitation to medical and surgical
- 20 benefits.
- (iv) Provide the comparative analyses, including the results of
- 22 the analyses, preformed to determine that the processes and
- 23 strategies used to apply each nonquantitative treatment limitation,
- 24 in operation, for mental health and substance use disorder benefits
- 25 are comparable to, and are applied no more stringently than, the
- 26 processes and strategies used to apply each nonquantitative
- 27 treatment limitation, in operation, for medical and surgical
- 28 benefits.
- (v) Disclose the specific findings and conclusions reached by



- 1 the insurer that the results of the analyses under this section
- 2 indicate that the insurer is in compliance with this section and
- 3 the Paul Wellstone and Pete Domenici mental health parity and
- 4 addiction equity act of 2008, subtitle B of title V of division C
- 5 of Public Law 110-343, and its implementing and related
- 6 regulations, which include 45 CFR 146.136, 45 CFR 147.160, and 45
- 7 CFR 156.115(a)(3).
- 8 (2) A health care corporation shall not have any separate
- 9 nonquantitative treatment limitations that apply to mental health
- 10 and substance use disorder benefits but do not apply to medical and
- 11 surgical benefits within any classification of benefits.

