Mental Health Parity Compliance Report

Introduction

The Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) generally require that mental health and substance use disorder benefits are treated comparable to medical and surgical benefits.

Mental Health Parity applies to the IA Health Link managed care program, the Iowa Health and Wellness Plan and the Iowa Medicaid Fee-for-Service (FFS) program. Compliance for the Children’s Health Insurance Program (CHIP), known in Iowa as Healthy and Well Kids in Iowa or hawk-i, will be addressed in the CHIP State Plan Amendment (SPA). The Managed Care Organizations (MCOs) are responsible for the parity analysis, and the State is responsible for ensuring and monitoring compliance for the IA Health Link managed care program. The State is responsible for the parity analysis and for ensuring and monitoring compliance for FFS program.

Federal Regulations

The Iowa Department of Human Services (DHS) has published this report to comply with the MHPAEA.

Medicaid Parity Rule (Rule) applies the MHPAEA to Medicaid and is intended to create consistency between commercial and Medicaid markets. The purpose of this report is to comply with the requirements for the state to provide assurance of compliance with parity requirements to the Centers for Medicare and Medicaid Services (CMS), to ensure compliance with delivery systems via state guidance and review of deliverables, to implement any needed changes, to monitor for continued compliance, and to post documentation of parity compliance on agency website.
Language in Managed Care Contracts

The IA Health Link managed care program contracts as of 2016, include the following Mental Health Parity language:

3.2.8.10 Parity

- In accordance with 42 C.F.R. § 438.3(n), Contractor shall deliver services in compliance with the requirements of 42 C.F.R. part 438, subpart K insofar as those requirements are applicable.

- This includes, but is not limited to: (i) ensuring medical management techniques applied to mental health or substance use disorder benefits are comparable to and applied no more stringently than the medical management techniques that are applied to medical and surgical benefits; (ii) ensuring compliance with MHPAEA for any benefits offered by the Contractor to members beyond those specified in Iowa’s Medicaid State plan; (iii) making the criteria for medical necessity determinations for mental health or substance use disorder benefits available to any current or potential member, or contracting provider upon request; (iv) providing the reason for any denial of reimbursement or payment with respect to mental health or substance use disorder benefits to members; and (v) providing out-of-network coverage for mental health or substance use disorder benefits when made available for medical and surgical benefits.

- Upon review, we feel this language would allow us to say our contracts are compliant with the Mental Health Parity regulations. We may consider future amendments to perhaps add more specificity; however we feel that the language above would ensure our "compliance" as required for 10/2/17.

This language is compliant with the Mental Health Parity requirement. However, we continue to review the contracts and monitor compliance with mental health parity requirements to assure the state maintains compliance with federal expectations.
Compliance Plan

The State, in cooperation with the MCOs, has completed the MHPEA Compliance Analysis, using CMS templates in the Compliance Toolkit and Parity Roadmap. The state has cataloged Medicaid benefit packages and delivery systems. Based on findings or regulatory changes, the State will be amending our CHIP SPA. The State has developed and implemented monitoring procedures, including a process for ongoing parity reassessment. Additionally, the State will update or amend MCO contracts as necessary based on assessment findings which are ongoing.