



## *Fulfilling the Promise of Parity*

### **LEGISLATIVE REQUEST**

*NABH strongly supports the Parity Enforcement Act of 2023 (H.R.3752), which would authorize the U.S. Labor Department to enforce parity requirements for group health plans and seeks civil monetary penalties from health plans that do not comply with parity law and regulations, including the final parity rule expected in 2024.*

*In addition, we support additional funding to improve parity enforcement at both the federal and state levels and advocate for the Mental Health Parity and Addiction Equity Act (MHPAEA) to include Medicare Advantage plans.*

### **MHPAEA Has Not Been Implemented Fully or Fairly**

*Congress passed MHPAEA nearly 16 years ago, and yet this pivotal law has not been implemented fully and fairly for all Americans. Consequently, insurers continue to apply coverage standards for behavioral healthcare services, including mental health and substance use disorder (SUD) treatments, which are far more stringent than the coverage criteria used for physical health services.*

The Centers for Disease Control and Prevention reports that deaths by suicide increased from 2021 to 2022 and remain on an upward trajectory. Equally troubling, the number of U.S. deaths due to opioid/fentanyl/methamphetamine use has continued to increase annually since 2018. Despite new social awareness and resources, our nation faces a behavioral health crisis that is actually becoming deadlier.

Neglecting parity must stop. At the patient level, the disparity between physical and behavioral healthcare has damaging consequences for patients. Relative to patients with a physical health need, behavioral healthcare patients generally struggle with more narrow criteria to receive coverage approval; they must endure extremely long wait times for therapy and other treatment from fewer, and on average, lower-paid practitioners in the field; and they face higher denial rates for services that actually are covered. In addition, current oversight of commercial and Medicaid managed care plans is not protecting the parity rights of insured individuals and their families.



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### **We Need Comprehensive Federal and State Oversight**

To truly implement MHPAEA, we need a comprehensive oversight structure that includes civil monetary and other penalties for non-compliance and appropriate state oversight of Medicaid managed care organizations. In 2023, the U.S. Labor, Health and Human Services, and Treasury Departments introduced a comprehensive parity rule to greatly increase the transparency and accountability of health plans subject to MHPAEA. NABH strongly supports this proposed rule.

Meanwhile, NABH led efforts to submit 2022 and 2023 amicus briefs on the *Wit v. UBH* case, a challenge to United Health Care's practice of applying narrow clinical standards for coverage, rather than adopting transparent guidelines based on generally accepted standards of care.

NABH is also monitoring the multiple lawsuits challenging unfounded behavioral healthcare service denials by health plans compared with physical health claims, and watching closely a multi-year legal challenge of a behavioral healthcare denial that we believe could advance compliance with federal parity law: a 9<sup>th</sup> U.S. Circuit Court of Appeals ruling that challenges the disparity between more lenient coverage criteria being applied for physical health services than for out-of-network, outpatient, SUD services.