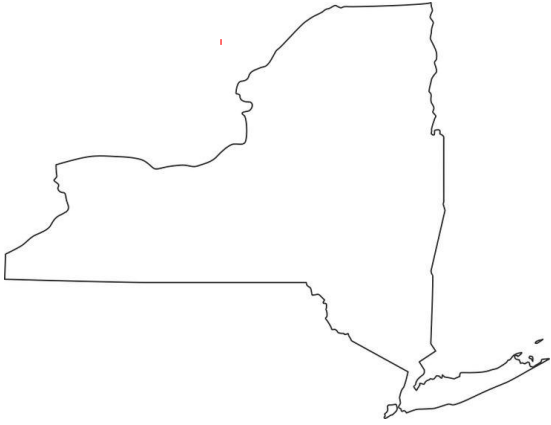


State Snapshot on Parity Implementation NEW YORK

June 2015



OVERVIEW

For the Parity Implementation Coalition's (PIC) June 2015 edition on promising practices in state implementation of The Mental Health Parity and Addiction Equity Act (MHPAEA) and the parity provisions of the Affordable Care Act (ACA), we chose New York. We interviewed Lisa Landau from the Health Care Bureau at NYS Office of the Attorney General and Karla Lopez from Legal Action Center.

Need Help Understanding your new rights under the Federal Parity Law? Click [HERE](#)

Click [HERE](#) for how to complain if you think your health plan has violated MHPAEA



Parity Implementation Coalition

Coalition members include: American Academy of Child and Adolescent Psychiatry, American Psychiatric Association, American Society of Addiction Medicine, Cumberland Heights, Faces and Voices of Recovery, Hazelden Betty Ford Foundation, MedPro Billing, Mental Health America, National Alliance on Mental Illness, National Association of Addiction Treatment Providers, National Association of Psychiatric Health Systems, Teen Screen, The Watershed Addiction Treatment Programs, Inc.

BEST PRACTICES

- 1) Work with your state attorney general (AG) to enforce state and federal parity laws
- 2) Broadly disseminate consumer hotline numbers at any relevant agency of state government and execute a campaign to get consumers to call and complain about denial of care they think may be a MHPAEA violation
- 3) Get state officials to publish denial rates of medical/surgical and mental health/substance use disorder claims
- 4) Establish a technical assistance hotline for providers

OVERVIEW

The Parity Implementation Coalition (PIC) provides bimonthly state profiles of promising practices in state implementation of The Mental Health Parity and Addiction Equity Act (MHPAEA) and the parity provisions of the Affordable Care Act (ACA).

For our June 2015 edition, we interviewed Lisa Landau, Chief of the Health Care Bureau at New York State Office of the Attorney General and Karla Lopez, Staff Attorney from Legal Action Center.

First Interview: Lisa Landau

1) How did the New York Attorney General's office decide to get involved in enforcing the federal parity law?

Ms. Landau: We understood from policy, newspaper and journal articles that despite the passage of both federal and state parity laws, the laws were unevenly being applied, and that consumers were still not getting the coverage to which they were entitled – in particular in both the eating disorder treatment arena as well as with respect to substance abuse treatment. While the laws were still relatively new, we believed that enforcement of these laws would go a long way to getting health plans to fully comply. In addition, the issue of mental health treatment (including substance abuse) has been a top priority for national, state and municipal health departments, so we believed that ensuring coverage for treatment would be consistent with what public health agencies have been targeting as a major public health priority.

2) What are some of the features in the way New York State government is organized that helped you engage in parity enforcement?

Ms. Landau: We are very fortunate in New York to have a dedicated Health Care Bureau in our AG's office where we have six attorneys who work on enforcement cases and a team of 10 employees, including one attorney, who staff our NY Health Care Bureau Helpline (800 428 9071) that addresses individual consumer complaints.

3) Were there events that occurred in your state that created a good environment for these enforcement activities?

Ms. Landau: The opiate epidemic in our state was already well documented by the media and was also a grave concern for our Attorney General, Eric Schneiderman. Our AG was personally involved in advancing legislation called "I-STOP" that would create a New York prescription drug monitoring program so as to prevent "doctor shopping" – i.e., patient opiate abusers who would go doctor to doctor for pain medication. Because of the level of concern over the misuse of opiates, and the hundreds of consumer complaints we received over denials of substance use services, our office had ample evidence necessary to begin investigating exclusions of certain levels of care as well as denials of mental health and behavioral health coverage more generally.

4) What issues were you particularly interested in?

Ms. Landau: We were getting a lot of complaints about total exclusions of both residential treatment for eating disorders as well as of substance use disorder residential treatment. Those exclusions raised a red flag for us. We used those exclusions as the basis, among other issues, to begin investigating. Through that process we found out that plans were frequently excluding residential treatment level of care for mental health/substance use disorder (MH/SUD) while covering residential treatment routinely for medical conditions. During our discovery process we also found that overall denials of MH/SUD claims were significantly higher than denials of other medical claims. Finally, we saw that the denial letters plans were sending to consumers did not provide sufficient information to plan participants about why the claim was denied.

As a result of these and other issues, we have successfully reached settlements with five insurance companies (Cigna, ValueOptions, EmblemHealth, MVP Health Care, and Excellus Health Plan).

5) What were some of the challenges you faced as you focused on these issues?

Ms. Landau: Getting provider and consumer groups to fully document compliance problems and to provide analysis of the trends they were seeing was difficult. It would have been extremely helpful for us had providers been tracking these issues and trends on an ongoing basis.

6) What are some of the challenges you are encountering as you monitor whether plans have changed their business practices required by your settlements with them?

Ms. Landau: Now that we have won these settlements, it requires a lot of government oversight to enforce them. We have retained outside monitors in some instances to help us oversee these agreements.

7) You have been incredibly helpful. Would you be willing to take questions from others doing state parity implementation and enforcement work?

Ms. Landau: Absolutely. We want to be a resource for other states and to share what we have learned in this process. (E-mail is: Lisa.Landau@ag.ny.gov)

Second Interview: Karla Lopez

1) Would you describe New York as actively implementing the Mental Health Parity and Addiction Equity Act?

Ms. Lopez: Yes, the Attorney General's (AG) office has been essential in implementing MHPAEA. The bulk of MHPAEA implementation has been through the AG's effort to effectively enforce the law.

2) What do you think has been most helpful in advocating for parity implementation in New York?

Ms. Lopez: The AG's office, and their hotline, have been one of the most—if not the most—helpful tool for parity implementation in New York State.

3) Has the state issued any guidance for implementing parity?

Ms. Lopez: Yes, the Insurance Commissioner's office issued guidance by providing a [circular letter](#) and [sample contract language](#). The NYS Department of Health also issued a letter in 2010, which can be found [here](#).

4) What have been your biggest challenges in parity implementation?

Ms. Lopez: Awareness about this law is limited and it is extremely complex. To help translate the law, we are developing a parity toolkit which can be accessed via our website www.lac.org. In creating the toolkit I have learned there is a lack of information on parity and a hunger for more knowledge, and it is so important to keep people informed. Limited resources is also a factor that limits robust enforcement.

5) What resources would be most helpful to achieve full implementation and enforcement of the law?

Ms. Lopez: We believe that a state focused toolkit would be extremely beneficial, and we are currently working on this New York toolkit that should be released by the fall. We are also working on a technical assistance hotline for providers to be ready by fall of this year.

6) Did your state establish a coalition to request parity implementation?

Ms. Lopez: Yes, the Coalition for Whole Health (CWH) New York.

7) Have you collaborated with other states on their parity implementation?

Ms. Lopez: Yes, I have spoken personally with Massachusetts, Colorado, California, and Maryland and the folks in our D.C. office are collaborating with a number of states.

8) Would you be willing to be a resource to other state advocates?

Ms. Lopez: Definitely. (E-mail is: klopez@lac.org)

9) Would you be willing to participate in a webinar with other states to share your best practices?

Ms. Lopez: Yes.