

FLORIDA MENTAL HEALTH PARITY NOTICE

What are Your Rights Under the Mental Health Parity Laws?

Your health coverage is subject to state and federal Mental Health Parity laws, which generally prohibit insurance plans from providing mental health or substance use disorder benefits in a more restrict manner than other medical benefits. If you believe our standards or practices relating to the provision of mental health or substance use disorder benefits are not compliance with the mental health parity laws, you, or your authorized representative may submit a complaint to the Division of Consumer Services at:

FDACS-Division of Consumer Services
P. O. Box 6700
Tallahassee, FL 32399-6700
1-800-HELP-FLA (435-7352) for English
1-800-FL-AYUDA (352-983) for Spanish

Complaint Hyperlink for English: <https://csapp/800helpfla.com/CSPublicApp/Complaints/FileComplaint.aspx>

Complaint Hyperlink for Spanish: <https://csapp.800helpfla.com/CSPublicApp/Complaints/File/ComplaintSpanish.aspx>

For more information on mental health benefits, please refer to your Certificate of Coverage/Schedule of Benefits or call the toll-free number on your Health ID Card.

Mental Health Parity and Addiction Equity Act (MHPAEA)

All small group, large group, and individual plans, on and off-exchange, are required to be compliance with the following MHPAEA standards or requirements for Mental Health and Substance Use Disorder Services (MH/SUD).

MH/SUD Requirement	Reference	Description of Standards or Requirements
Defining MH/SUD Benefits	42 U.S.C. 399gg-26 42 U.S.C. 18031 (j) 45 CFR 146.136 (a) 45 CFR 156.115 (a) (3)	The plan shall define mental health benefits or substance use disorder benefits to mean items or services for the treatment of a mental health condition or substance use disorder, as defined by the policy or contract or applicable state law. Any condition or disorder defined as not a mental health condition or substance use disorder must be consistent with generally recognized independent standards of current medical practice and applicable state law.
Classifying Benefits	42 U.S.C. 300gg-26 42 U.S.C. 18031 (j) 45 CFR 146.136 (c)(2)(ii)(A) 45 CFR 146.136 (c)(3)(iii)(B) 45 CFR 146.136(c)(3)(iii)(C) 45 CFR 156.115 (a) (3)	We shall assign MH/SUD benefits to each of the six classifications and permitted sub-classifications. We must apply the same standards to medical/surgical benefits and to mental health or substance use disorder benefits in determining the classification or sub-classification in which a particular benefit belongs. We shall demonstrate that mental health or substance us disorder benefits are covered in each classification in which medica/surgical benefits are covered.
Financial Requirements and Quantitative Treatment Limitations	42 U.S. C. 300gg-26 42 U.S.C. 18031 (j) 45 CFR 146.136 (c)(2)(i) 45 CFR 146.136 (c)(3)(i)(A) 45 CFR 146.136(c)(3)(i)(B)(1) 45 CFR 146.136(c)(3)(i)(B)(2) ACA FAQ 34 Q3 45 CFR 156.115(a)(3)	Your coverage shall not apply any financial requirements or quantitative treatment limitation on mental health or substance use disorder benefits in any classification (or applicable sub-classification) that is more restrictive than the predominant financial requirement or quantitative treatment limitation of that type applied to substantially all medical/surgical benefits in the same classification (or applicable sub-classification).
Cumulative Financial Requirements and Cumulative Quantitative Treatment Limitations	45 U. S. C. 300gg-26 (3) 45 CFR 146.136 (c) (3) (v)	We shall not apply any cumulative financial requirement or quantitative treatment limitation to mental health or substance use disorder benefits in a classification that

MH/SUD Requirement	Reference	Description of Standards or Requirements
Nonquantitative treatment limitations (NQTLs)	45 U. S. C. 300gg-26 (a)(3)(A) 42 U. S. C 18031 (j) 45 CFR 146.136 (c) (4) (1) 45 CFR 56.115 (a) (3)	<p>accumulates separately from any established for medica/surgical benefits in the same condition.</p> <p>We shall justify the application of any NQTL to mental health or substance use disorder benefits within a classification of benefits (or applicable sub-classification) such that any processes, strategies, evidentiary standards, or other acts used to apply a limitation, as written and in operation, are comparable to, and are applied no more stringently than the processes, strategies, evidentiary standards, or other facts used to apply the limitation to medica/surgical benefits within the classification (or applicable sub-classification).</p> <p>NQTLs shall be categorized as: 1) medical management-which includes issuer prior authorization, concurrent review and retrospective review protocols and the medical necessity criteria utilized in conjunction with them; 2) exclusions of coverage; e.g., experimental or investigational; 3) plan provider network matters-credentialing criteria network tiering; 4) network adequacy; i.e. plan MH/SUD network performance; 5) provider reimbursement rates; 6) prescription drugs; 7) other NQTLs as identified by the issuer-restrictions on facility type, geographical location.</p>
Disclosure	45 CFR 146.136 (d) (1) 45 CFR 146.136 (d) (2) 45 CFR 146.136 (d) (3) 45 CFR 147.136 (b) (2) 45 CFR 147.136 (b) (3)	<p>We shall ensure that we comply with all availability of policy or contract information and related disclosure obligations regard: 1) criterial for medical necessity determinations; 2) reasons for denial of services; 3) information relevant to medical/surgical, mental health, and substance use disorder benefits; 4) rules regarding claims and appeals, including the right of the claimants to free reasonable access and copies of documents, records and other information including information on medical necessity criteria for both medical/surgical benefits and mental health and substance use disorder benefits, as well as the processes, strategies, evidentiary standards, and other factors used to apply a NQTL with respect to medical/surgical benefits and mental health or substance use disorder benefits under your plan.</p> <p>If we contract with a managed behavioral health organization (MBHO) to provide any or all our mental health or substance use disorder benefits we ensure that we coordinate with the MBHO to secure compliance with MHPAEA.</p>