HOUSE BILL NO. XXXX

Mental Health and Substance Use Disorder Parity.

Sponsored by: Representative(s) \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_

A BILL

for

AN ACT relating to health insurance; mandating parity for mental health and substance use disorder under health insurance policies issued in the state; specifying Commissioner parity implementation; specifying applicability; and providing for an effective date.

*Be it enacted by the Legislature of the State of Wyoming:*

**Section 1.** W.S. 26-20-701 is created to read:

Article 7

Parity for Mental Health and Substance Use Disorder Insurance

**26-20-701. Required mental health and substance use disorder parity in individual and group policies or contracts.**

(a) All individual or group health insurance policies providing coverage on an expense incurred basis, individual and group service or indemnity type health insurance contracts issued by any insurer, including any nonprofit corporation and individual and group service contracts issued by a health maintenance organization, shall meet the requirements of, and the Commissioner may enforce, the Mental Health Parity and Addiction Equity Act of 2008 found at 42 U.S.C. 300gg-26 and all related regulations as of January 1, 2018, including 45 CFR 146.136, 45 CFR 147.160, and 45 CFR 156.115(a)(3).

**26-20-702. Commissioner implementation specifications.**

(a) The Commissioner shall implement and enforce applicable provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, and any amendments to, and any federal guidance or regulations relevant to, that act, including 45 CFR 146.136, 45 CFR 147.136, 45 CFR 147.160, and 45 CFR 156.115(a)(3), which includes:

(i) Proactively ensuring compliance by insurers, nonprofit corporations, and health maintenance organizations;

(ii) Evaluating all consumer or provider complaints regarding mental health and substance use disorder coverage for possible parity violations;

(iii) Performing parity compliance market conduct examinations of insurers, nonprofit corporations, and health maintenance organizations, particularly market conduct examinations that focus on nonquantitative treatment limitations such as prior authorization, concurrent review, retrospective review, step-therapy, network admission standards, reimbursement rates, and geographic restrictions, among other nonquantitative treatment limitations;

(iv) Requesting that insurers, nonprofit corporations, and health maintenance organizations submit comparative analyses during the form review process demonstrating how they design and apply nonquantitative treatment limitations, both as written and in operation, for mental health and substance use disorder benefits as compared to how they design and apply nonquantitative treatment limitations, as written and in operation, for medical and surgical benefits; and

(v) The Commissioner may adopt rules as may be necessary to effectuate any provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 that relate to the business of insurance.

(b) Not later than March 1, 2020, the Commissioner shall issue a report and educational presentation to the Legislature, which shall:

(i) Cover the methodology the Commissioner is using to check for compliance with the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), and any federal regulations or guidance relating to the compliance and oversight of MHPAEA;

(ii) Identify market conduct examinations conducted or completed during the preceding 12-month period regarding compliance with parity in mental health and substance use disorder benefits under state and federal laws and summarize the results of such market conduct examinations;

(iii) Detail any educational or corrective actions the Commissioner has taken to ensure compliance with MHPAEA; and

(iv) The report must be written in non-technical, readily understandable language and shall be made available to the public by, among such other means as the Commissioner finds appropriate, posting the report on the Internet website of the Department of Insurance.

**Section 2.** This act shall only apply to any individual or group health insurance policy or plan that is delivered, issued, renewed, modified, amended or extended on or after July 1, 2019.

**Section 3.** This shall is effective July 1, 2019.

(END)