

**129th MAINE LEGISLATURE**

**First REGULAR SESSION-2019**

# Legislative Document No. XXXX

S.P. XXX In Senate, January \_\_, 2019

# An Act To Amend the Mental Health Insurance Coverage Laws

(AFTER DEADLINE)

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 205.

Reference to the Committee on Labor, Commerce, Research and Economic Development suggested and ordered printed.



HEATHER J.R. PRIEST

Secretary of the Senate

Presented by Senator \_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Be it enacted by the People of the State of Maine as follows:**

 **Sec. 1. 24-A MRSA §4320-L** is enacted to read:

 **§4320-L. Coverage for the psychiatric Collaborative Care Model**

**1. Definitions.** As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. “Mental health and substance use disorder benefits” means benefits for the treatment of any condition or disorder that involves a mental health condition or substance use disorder that falls under any of the diagnostic categories listed in the mental disorders section of the current edition of the International Classification of Disease or that is listed in the mental disorders section of the most recent version of the Diagnostic and Statistical Manual of Mental Disorders.

B. “The Psychiatric Collaborative Care Model” means the evidence-based, integrated behavioral health service delivery method described at 81 FR 80230.

 **2. Required coverage.** A carrier offering a health plan in this State that provides coverage of mental health and substance use disorder benefits shall provide reimbursement for such benefits that are delivered through the psychiatric Collaborative Care Model, which shall include the following current procedural terminology (CPT) billing codes established by the American Medical Association (AMA):

A. 99492;

B. 99493;

C. 99494; and

D. The superintendent shall update this list of codes if there are any alterations or additions to the billing codes for the Collaborative Care Model.

 **3. Utilization management.** A carrier offering a health plan in this State that provides coverage of mental health and substance use disorder benefits may deny reimbursement of any CPT code listed in this section on the grounds of medical necessity, provided that such medical necessity determinations are in compliance with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 and its implementing and related regulations, and that such determinations are made in accordance with the utilization review requirements found in Chapter 34 of this Title and 24-A MRSA §4304.

 **Sec. 2. Application.** The requirements of this Act apply to all carriers, as they are defined in 24-A MRSA §4301, that execute, deliver, issue for delivery, continue or renew individual and group policies, contracts and certificates in this State on or after January, 2019.

**Summary**

This bill requires carriers that provide coverage of mental health and substance use disorder benefits to reimburse for such benefits that are provided through the psychiatric Collaborative Care Model or other integrated behavioral health service delivery method.