2019 SESSION

HOUSE BILL ***XXXX***

AN ACT relative to the collaborative care model service delivery method.

SPONSORS \_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_

COMMITTEE Health and Human Services

ANALYSIS

This bill:

I. Specifies psychiatric Collaborative Care Model insurance coverage requirements.

Explanation: Matter added to current law appears in ***bold italics***.

Matter removed from current law appears [in brackets and ~~struckthrough~~.]

Matter which is either (a) all new or (b) repealed and reenacted appears in

regular type.

STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Nineteen*

AN ACT relative to mental health and substance use disorder insurance coverage

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1. Collaborative Care; RSA 415 by inserting after chapter J the following new chapter:

I. In this chapter:

(a) "Health benefit policy" means any individual or group plan, policy, or contract for health care services issued, delivered, issued for delivery, executed, or renewed in this state, including, but not limited to, those contracts executed by the state of New Hampshire on behalf of state employees under RSA 21-I, by an insurer.

(b) "Insurer" means an accident and sickness insurer, fraternal benefit society, hospital service corporation, medical service corporation, health care corporation, health maintenance organization, preferred provider organization, provider sponsored health care corporation, managed care entity, or any similar entity authorized to issue contracts under this title or to provide health benefit policies.

(c) “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.

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

II. Any insurer providing a health benefit policy that provides 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.

(d) The commissioner shall update this list of codes if there are any alterations or additions to the billing codes for the Collaborative Care Model.

(f) Any insurer providing a health benefit policy that provides 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 420-E of this Title.

2. Effective Date. This act shall take effect 60 days after its passage.