# AN ACT relating to the psychiatric collaborative care model.

***Be it enacted by the General Assembly of the Commonwealth of Kentucky:***

# SECTION 1. A NEW SECTION OF KRS 304.17A-670 IS CREATED TO READ AS FOLLOWS:

As used in KRS 304.17A-670 as it pertains to the Collaborative Care Model:

## (1) "Health benefit plan" has the same meaning as in KRS 304.17A-005;

## (2) "Insurer" has the same meaning as in KRS 304.17A-005;

## (3) "Mental health condition" has the same meaning as in KRS 304.17A-660; and

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

# SECTION 2. A NEW SECTION OF KRS CHAPTER 304 IS CREATED TO READ AS FOLLOWS:

# ***All insurers that issue, deliver, or renew any health benefit plan that provides coverage for treatment of mental health conditions 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):***

# ***99492;***

# ***99493;***

# ***99494; and***

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

# ***All insurers that issue, deliver, or renew any health benefit plan that provides coverage for treatment of mental health conditions 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 KRS 304.17A-600 through KRS 304.17A-633.***