



## ***Mental Health Parity and Addiction Equity Act (MHPAEA) Consolidated Appropriations Act 2021 Enhancements Frequently Asked Questions***

This FAQ summarizes the provisions of Consolidated Appropriations Act 2021 (the Act) and its enhancements to the Mental Health Parity and Addiction Equity Act (MHPAEA) released by the Department of Health and Human Services (HHS), the Department of Labor, and the Department of the Treasury (the Departments).

### **Summary of Federal Legislation**

#### **What are the new MHPAEA requirements of the federal legislation enacted by the Act that affect group health plans?**

The Act requires group health plans that offer both medical and surgical benefits and mental health or substance use disorder (MH/SUD) benefits that impose non-quantitative treatment limitations (NQTLs) on MH/SUD benefits to perform and document comparative analyses of the design and application of NQTLs, upon request, to the secretaries of the Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury (Treasury).

#### **What are NQTLs?**

NQTLs are limitations on the scope or duration of benefits for treatment. These are generally non-numerical. Examples of NQTLs on MH/SUD benefits include, but not limited to:

- Medical management standards
- Prior authorization or ongoing authorization requirements
- Concurrent review standards
- Formulary design for prescription drugs
- Step therapy protocols
- Standards for providing access to out-of-network providers
- Exclusions based on failure to complete a course of treatment
- Standards for provider admission to participate in a network, including reimbursement rates

#### **How does a plan determine compliance with the new requirements?**

The Act does not provide any guidance on how the comparative NQTL analysis should be conducted, or what information it must contain. The secretaries are required to issue guidance within 18 months of the date the Act was signed into law (by late June 2022). In the meantime, the DOL has issued a *Self-Compliance Tool* found at [www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/mental-health-parity/self-compliance-tool.pdf](http://www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/mental-health-parity/self-compliance-tool.pdf) which plans can use to conduct the analysis. Additionally, the DOL issued a FAQ which can be found [here](#).

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## **Does the Act impose other requirements on plans?**

The *Tool* not only covers the analysis of the NQTL's, but also addresses all of the MHPAEA requirements (which the Act has not modified) including the Quantitative Treatment Limitations (QTLs) requirements. The agencies have issued the *Tool* for plans to use as a good faith effort to evaluate compliance with the entirety of the MHPAEA, correct any areas to bring the plan into compliance and document the results and actions taken.

## **What are QTLs?**

QTLs are expressed numerically; Example: deductibles, coinsurance, and treatment/benefit limitations (such as a 50 outpatient visits per year).

## **What is the purpose of the MHPAEA enhancements?**

The purpose is to put in place enhanced compliance requirements and, thus, provide new protections related to MHPAEA.

## **How is HPI handling the new analytical requirements for MHPAEA?**

HPI will provide assistance to our clients to help them comply with the new enhancements to MHPAEA by providing data and reporting for clients to use when they complete the Self-Compliance Tool for their plans to test non-quantitative treatment limitations (NQTL).

HPI will assist those clients for whom we perform medical management services. If the client outsources its medical management to another vendor, the client will need to engage with that vendor for the non-quantitative treatment limitations analysis.

HPI has contracted with an outside actuarial firm to perform the *quantitative treatment limitation* (QTL) calculations upon a client's request.

## **What format will this analysis be in?**

NQTL analysis will be presented in a PDF report consisting of columns that represent the NQTL services, the Med/Surg standards for the plan design in question, the BH/SUD standards for the plan design in question, and a compliance review for parity across the Med/Surg and BH/SUD reported standards.

The QTL analysis format will also be presented in a PDF report reflecting the testing results.

## **What will the cost be to clients for these services and will that cost be incurred?**

The cost for the NQTL and QTL analysis is \$2,000.

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## **When can clients request these services (NQTL assistance or QTL assistance)?**

HPI anticipates having systems ready to handle client requests in early Fall. However, if a client is contacted by a federal agency, HPI will assist upon request to meet the issued federal turnaround time for that client.

## **How to Contact HPI**

### **Where can clients obtain more information?**

Please reach out to your Account Managers for assistance.

The information contained in this FAQ is based on our current understanding of how significant developments may affect group benefit plans. It should not be construed as specific legal advice or legal opinion. The contents are for general information purposes only and are not a substitute for the advice of legal counsel.