

## RESOLUTION

Subject: Affirming the Mental Health Parity and Addiction Equity Act is Federal Law and Insurers and Providers Must Abide by the Law with Enforcement from the State

Submitted by: Greater Louisville Medical Society

Referred to: Reference Committee

WHEREAS, about 19.9 million adults needed substance use treatment in 2016, representing 8.1 percent of adults, and of the 19.9 million adults needing substance use treatment, only 10.8 percent received specialty treatment; and

WHEREAS, the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act passed in 2008 to end discriminatory healthcare practices against those with mental illness and/or addiction; and

WHEREAS, insurers may not be complying with some components of the law, albeit unintentionally, which violates the federal parity statute and can lead to deaths from suicides, overdoses and other forms of preventable death by inappropriately limiting access to care; and

WHEREAS, many states have already moved to enact legislation to provide transparency and accountability for mental health and substance use disorder; and

WHEREAS, states have primary enforcement authority over insurers that sell health insurance policies in their states and can protect consumers with Substance Use Disorders to ensure they are able to access substance use treatment by mitigating violations of the federal parity statute regarding cost and availability; now, therefore, be it

RESOLVED, that the Kentucky Medical Association requests the state Department of Insurance and Commissioner to take action to determine if insurers are in compliance with the federal parity law through primary enforcement authority including establishing reporting requirements for insurers to demonstrate how they design and apply their managed care tactics; and be it further

RESOLVED, the KMA request the state Department of Insurance and Commissioner perform market conduct examinations of insurers and use of nonquantitative treatment limitations when addressing the matters of pre-existing conditions, length of treatment, insurance coverage, dosage limitations, network adequacy, and requirements for counseling frequency based on patient history and need; and be it further

RESOLVED, that the KMA support federal efforts to achieve mental health parity compliance through federal legislation and regulation.