

# HOUSE BILL 1216

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CF SB 581

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By: **Delegates A. Kelly, Bobo, Costa, Cullison, Eckardt, Elliott, Feldman, Hammen, Hubbard, Kach, Kipke, Pena–Melnyk, Rosenberg, Tarrant, and V. Turner**

Introduced and read first time: February 8, 2013

Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Federal Mental Health Parity and Addiction Equity Act –**  
3 **Consumer Bill of Rights**

4 FOR the purpose of requiring certain carriers that offer a certain health insurance  
5 policy or contract to provide, in the mental health and substance use disorder  
6 benefits sections of the health insurance policy or contract documents, certain  
7 notices and other information relating to the federal Mental Health Parity and  
8 Addiction Equity Act; requiring a carrier to provide certain policy or contract  
9 information or documents to a member within a certain period of time;  
10 requiring a carrier to post on its Web site and provide by certain means within a  
11 certain period of time a release of information authorization form; defining  
12 certain terms; making the provisions of this Act applicable to health  
13 maintenance organizations; and generally relating to information in health  
14 insurance documents relating to compliance with the federal Mental Health  
15 Parity and Addiction Equity Act.

16 BY adding to

17 Article – Health – General  
18 Section 19–706(oooo)  
19 Annotated Code of Maryland  
20 (2009 Replacement Volume and 2012 Supplement)

21 BY adding to

22 Article – Insurance  
23 Section 15–128  
24 Annotated Code of Maryland  
25 (2011 Replacement Volume and 2012 Supplement)

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
2 MARYLAND, That the Laws of Maryland read as follows:

3 **Article – Health – General**

4 19–706.

5 **(OOOO) THE PROVISIONS OF § 15–128 OF THE INSURANCE ARTICLE**  
6 **APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.**

7 **Article – Insurance**

8 **15–128.**

9 **(A) (1) IN THIS SECTION THE FOLLOWING TERMS HAVE THE**  
10 **MEANINGS INDICATED.**

11 **(2) “ACT” MEANS THE FEDERAL MENTAL HEALTH PARITY AND**  
12 **ADDICTION EQUITY ACT.**

13 **(3) “CARRIER” MEANS:**

14 **(I) AN INSURER;**

15 **(II) A NONPROFIT HEALTH SERVICE PLAN; OR**

16 **(III) A HEALTH MAINTENANCE ORGANIZATION.**

17 **(B) THIS SECTION APPLIES TO EACH HEALTH INSURANCE POLICY OR**  
18 **CONTRACT THAT:**

19 **(1) IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE TO AN**  
20 **EMPLOYER OR INDIVIDUAL ON A GROUP OR AN INDIVIDUAL BASIS;**

21 **(2) PROVIDES COVERAGE ON AN EXPENSE–INCURRED BASIS; AND**

22 **(3) IS SUBJECT TO THE ACT.**

23 **(C) A CARRIER THAT OFFERS A HEALTH INSURANCE POLICY OR**  
24 **CONTRACT SUBJECT TO THIS SECTION SHALL PROVIDE, IN THE MENTAL**  
25 **HEALTH AND SUBSTANCE USE DISORDER BENEFITS SECTIONS OF THE HEALTH**  
26 **INSURANCE POLICY OR CONTRACT DOCUMENTS, INCLUDING CERTIFICATES OF**  
27 **COVERAGE, MEMBER CONTRACTS, AND MEMBER BOOKLETS, AND ON THE**  
28 **CARRIER’S WEB SITE:**

1           **(1) NOTICE THAT THE POLICY OR CONTRACT IS SUBJECT TO THE**  
2 **ACT, WHICH REQUIRES THAT THE FINANCIAL REQUIREMENTS AND**  
3 **QUANTITATIVE AND NONQUANTITATIVE TREATMENT LIMITATIONS APPLIED TO**  
4 **MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES BE COMPARABLE**  
5 **TO AND NO MORE RESTRICTIVE THAN THE FINANCIAL REQUIREMENTS AND**  
6 **QUANTITATIVE AND NONQUANTITATIVE TREATMENT LIMITATIONS APPLIED TO**  
7 **MEDICAL AND SURGICAL SERVICES;**

8           **(2) A TELEPHONE NUMBER A MEMBER MAY CALL WITH**  
9 **QUESTIONS ABOUT COMPLIANCE OF THE MEMBER'S POLICY OR CONTRACT WITH**  
10 **THE ACT;**

11           **(3) NOTICE THAT:**

12                   **(I) COMPLAINTS REGARDING FINANCIAL REQUIREMENTS**  
13 **AND TREATMENT LIMITATIONS THAT MAY BE NONCOMPLIANT WITH THE ACT**  
14 **CAN BE FILED WITH THE COMMISSIONER; AND**

15                   **(II) HELP IN FILING A COMPLAINT MAY BE OBTAINED FROM**  
16 **THE HEALTH EDUCATION AND ADVOCACY UNIT OF THE ATTORNEY GENERAL'S**  
17 **OFFICE;**

18           **(4) (I) NOTICE THAT A MEMBER, WITHIN 10 BUSINESS DAYS**  
19 **AFTER A REQUEST IS RECEIVED BY THE CARRIER, IS ENTITLED TO ALL POLICY**  
20 **OR CONTRACT DOCUMENTS NECESSARY TO DETERMINE WHETHER THE POLICY**  
21 **OR CONTRACT IS IMPLEMENTING COMPLIANT FINANCIAL REQUIREMENTS AND**  
22 **TREATMENT LIMITATIONS, INCLUDING MEDICAL NECESSITY CRITERIA AND**  
23 **OTHER POLICIES AND PROCEDURES, FOR BOTH MENTAL HEALTH AND**  
24 **SUBSTANCE USE DISORDER BENEFITS AND MEDICAL AND SURGICAL BENEFITS;**  
25 **AND**

26                   **(II) INSTRUCTIONS ON HOW TO OBTAIN THE DOCUMENTS;**  
27 **AND**

28           **(5) NOTICE OF THE PROPER PROCEDURES, INCLUDING THE**  
29 **PROCEDURES FOR FILING A COMPLAINT WITH THE COMMISSIONER, TO BE**  
30 **FOLLOWED IF A MEMBER IS UNABLE TO SECURE AN APPOINTMENT WITH AN**  
31 **IN-NETWORK MENTAL HEALTH OR SUBSTANCE USE DISORDER SERVICE**  
32 **PROVIDER WITHOUT UNREASONABLE DELAY.**

33           **(D) A CARRIER SHALL PROVIDE ANY REQUESTED POLICY OR CONTRACT**  
34 **INFORMATION OR DOCUMENTS TO WHICH A MEMBER IS ENTITLED UNDER**

1 **SUBSECTION (C) OF THIS SECTION TO A MEMBER WITHIN 10 BUSINESS DAYS**  
2 **AFTER THE REQUEST IS RECEIVED.**

3 **(E) A CARRIER SHALL:**

4 **(1) POST A RELEASE OF INFORMATION AUTHORIZATION FORM ON**  
5 **ITS WEB SITE; AND**

6 **(2) PROVIDE A RELEASE OF INFORMATION AUTHORIZATION FORM**  
7 **BY STANDARD MAIL WITHIN 10 BUSINESS DAYS AFTER A REQUEST FOR THE**  
8 **FORM IS RECEIVED.**

9 **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**  
10 **October 1, 2013.**