

HOUSE BILL 1216

C3

3lr1211
CF SB 581

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

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 19, 2013

CHAPTER _____

1 AN ACT concerning

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

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 FOR the purpose of requiring health maintenance organizations and entities that
17 issue or deliver certain health insurance policies or contracts to provide, on their
18 Web sites and in print, notice about certain benefits for mental illness,
19 emotional disorders, drug abuse, or alcohol abuse required under State law and
20 under the federal Mental Health Parity and Addiction Equity Act and notice
21 that members and insureds may contact the Maryland Insurance
22 Administration for further information; requiring the health maintenance

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 organizations and entities to post a release of information authorization on the
 2 their Web sites and to provide by standard mail to a member or insured a
 3 release of information authorization form within a certain period of time;
 4 requiring the Administration to provide on its Web site certain notice relating to
 5 filing complaints, obtaining copies of insurance policies and contracts, and
 6 requesting referrals; and generally relating to notice about certain benefits for
 7 mental illness, emotional disorders, drug abuse, or alcohol abuse and release of
 8 information authorization forms under health insurance.

9 BY adding to

10 Article – Health – General

11 Section ~~19-706(oooo)~~ 19-703.1(f) and (g)

12 Annotated Code of Maryland

13 (2009 Replacement Volume and 2012 Supplement)

14 BY adding to

15 Article – Insurance

16 Section ~~15-128~~ 15-802(h) and (i)

17 Annotated Code of Maryland

18 (2011 Replacement Volume and 2012 Supplement)

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

21 **Article – Health – General**

22 ~~19-706.~~

23 ~~(oooo) THE PROVISIONS OF § 15-128 OF THE INSURANCE ARTICLE~~
 24 ~~APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.~~

25 19-703.1.

26 **(F) A HEALTH MAINTENANCE ORGANIZATION SHALL PROVIDE ON ITS**
 27 **WEB SITE AND ANNUALLY IN PRINT TO ITS MEMBERS:**

28 **(1) NOTICE ABOUT THE BENEFITS REQUIRED UNDER THIS**
 29 **SECTION AND, IF APPLICABLE TO THE CONTRACT OF THE MEMBER, THE**
 30 **FEDERAL MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT; AND**

31 **(2) NOTICE THAT THE MEMBER MAY CONTACT THE MARYLAND**
 32 **INSURANCE ADMINISTRATION FOR FURTHER INFORMATION ABOUT THE**
 33 **BENEFITS.**

34 **(G) A HEALTH MAINTENANCE ORGANIZATION SHALL:**

~~1 MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES BE COMPARABLE
2 TO AND NO MORE RESTRICTIVE THAN THE FINANCIAL REQUIREMENTS AND
3 QUANTITATIVE AND NONQUANTITATIVE TREATMENT LIMITATIONS APPLIED TO
4 MEDICAL AND SURGICAL SERVICES;~~

~~5 (2) A TELEPHONE NUMBER A MEMBER MAY CALL WITH
6 QUESTIONS ABOUT COMPLIANCE OF THE MEMBER'S POLICY OR CONTRACT WITH
7 THE ACT;~~

~~8 (3) NOTICE THAT:~~

~~9 (I) COMPLAINTS REGARDING FINANCIAL REQUIREMENTS
10 AND TREATMENT LIMITATIONS THAT MAY BE NONCOMPLIANT WITH THE ACT
11 CAN BE FILED WITH THE COMMISSIONER; AND~~

~~12 (II) HELP IN FILING A COMPLAINT MAY BE OBTAINED FROM
13 THE HEALTH EDUCATION AND ADVOCACY UNIT OF THE ATTORNEY GENERAL'S
14 OFFICE;~~

~~15 (4) (I) NOTICE THAT A MEMBER, WITHIN 10 BUSINESS DAYS
16 AFTER A REQUEST IS RECEIVED BY THE CARRIER, IS ENTITLED TO ALL POLICY
17 OR CONTRACT DOCUMENTS NECESSARY TO DETERMINE WHETHER THE POLICY
18 OR CONTRACT IS IMPLEMENTING COMPLIANT FINANCIAL REQUIREMENTS AND
19 TREATMENT LIMITATIONS, INCLUDING MEDICAL NECESSITY CRITERIA AND
20 OTHER POLICIES AND PROCEDURES, FOR BOTH MENTAL HEALTH AND
21 SUBSTANCE USE DISORDER BENEFITS AND MEDICAL AND SURGICAL BENEFITS;
22 AND~~

~~23 (II) INSTRUCTIONS ON HOW TO OBTAIN THE DOCUMENTS;
24 AND~~

~~25 (5) NOTICE OF THE PROPER PROCEDURES, INCLUDING THE
26 PROCEDURES FOR FILING A COMPLAINT WITH THE COMMISSIONER, TO BE
27 FOLLOWED IF A MEMBER IS UNABLE TO SECURE AN APPOINTMENT WITH AN
28 IN-NETWORK MENTAL HEALTH OR SUBSTANCE USE DISORDER SERVICE
29 PROVIDER WITHOUT UNREASONABLE DELAY.~~

~~30 (D) A CARRIER SHALL PROVIDE ANY REQUESTED POLICY OR CONTRACT
31 INFORMATION OR DOCUMENTS TO WHICH A MEMBER IS ENTITLED UNDER
32 SUBSECTION (C) OF THIS SECTION TO A MEMBER WITHIN 10 BUSINESS DAYS
33 AFTER THE REQUEST IS RECEIVED.~~

~~34 (E) A CARRIER SHALL:~~

1 ~~(1) POST A RELEASE OF INFORMATION AUTHORIZATION FORM ON~~
2 ~~ITS WEB SITE; AND~~

3 ~~(2) PROVIDE A RELEASE OF INFORMATION AUTHORIZATION FORM~~
4 ~~BY STANDARD MAIL WITHIN 10 BUSINESS DAYS AFTER A REQUEST FOR THE~~
5 ~~FORM IS RECEIVED.~~

6 15-802.

7 (H) AN ENTITY THAT ISSUES OR DELIVERS A POLICY OR CONTRACT
8 SUBJECT TO THIS SECTION SHALL PROVIDE ON ITS WEB SITE AND ANNUALLY IN
9 PRINT TO ITS INSUREDS:

10 (1) NOTICE ABOUT THE BENEFITS REQUIRED UNDER THIS
11 SECTION AND, IF APPLICABLE TO THE POLICY OR CONTRACT OF THE INSURED,
12 THE FEDERAL MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT; AND

13 (2) NOTICE THAT THE INSURED MAY CONTACT THE
14 ADMINISTRATION FOR FURTHER INFORMATION ABOUT THE BENEFITS.

15 (I) AN ENTITY THAT ISSUES OR DELIVERS A POLICY OR CONTRACT
16 SUBJECT TO THIS SECTION SHALL:

17 (1) POST A RELEASE OF INFORMATION AUTHORIZATION FORM ON
18 ITS WEB SITE; AND

19 (2) PROVIDE A RELEASE OF INFORMATION AUTHORIZATION FORM
20 BY STANDARD MAIL WITHIN 10 BUSINESS DAYS AFTER A REQUEST FOR THE
21 FORM IS RECEIVED.

22 SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland Insurance
23 Administration shall provide on its Web site notice that:

24 (1) complaints regarding noncompliance with the federal Mental
25 Health Parity and Addiction Equity Act may be filed with the Commissioner;

26 (2) an insured may obtain assistance in filing a complaint with a
27 carrier or the Administration from the Health Education and Advocacy Unit in the
28 Office of the Attorney General;

29 (3) an insured may obtain a copy of the health insurance policy or
30 contract of the insured and should contact the carrier for the copy; and

31 (4) an insured may request a referral to a specialist or nonphysician
32 specialist who is not part of the carrier's provider panel if:

1 (i) the insured requires specialized health care services or
2 medical care; and

3 (ii) 1. the carrier does not have a specialist or nonphysician
4 specialist with the professional training and expertise to treat or provide health care
5 services for the condition or disease of the insured; or

6 2. the carrier cannot provide reasonable access to a
7 specialist or nonphysician specialist to treat or provide health care services for the
8 condition or disease of the insured without unreasonable delay or travel.

9 SECTION ~~2~~ 3. AND BE IT FURTHER ENACTED, That this Act shall take
10 effect October 1, 2013.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.