

**STATE OF ALASKA  
THE LEGISLATURE**

**2024**

**Source**  
SCR 9

**Legislative  
Resolve No.**  
23



Recognizing the need for parity in the provision of mental health and substance use disorder medical assistance benefits in the state; and urging the Department of Health to adopt regulations that ensure parity in the provision of mental health and substance use disorder medical assistance benefits in the state.

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**BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

**WHEREAS** the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that generally prevents group health plans and health insurance issuers that provide mental health or substance use disorder benefits from imposing less favorable benefit limitations on those benefits than on medical or surgical benefits; and

**WHEREAS** at least 37 states have enacted mental health parity laws; and

**WHEREAS** federal regulations contain an illustrative, nonexhaustive list of nonquantitative treatment limitations (NQTL) that serve as warning signs that a health plan or health insurance issuer may be imposing an impermissible NQTL; and

**WHEREAS** state regulations include six NQTLs relating to the provision of mental

health and substance use disorder benefits, including requiring service authorizations and time-based treatment plans; and

**WHEREAS** those NQTLs cause long delays and create barriers for individuals seeking mental health and substance abuse treatment; and

**WHEREAS** state regulations relating to the provision of medical and surgical benefits do not include the six NQTLs applicable to the provision of mental health and substance use disorder benefits; and

**WHEREAS** state regulations relating to the provision of medical and surgical benefits consist of one page, while state regulations relating to the provision of mental health and substance use disorder benefits consist of over 120 pages; and

**WHEREAS** an undue administrative burden is placed on providers of mental health and substance use disorder benefits, and the clients and patients of the providers, as a result of the lack of parity in the provision of mental health and substance use disorder benefits; and

**WHEREAS** immediate access to outpatient and inpatient mental health and substance use disorder services is adversely compromised as a result of the lack of parity in the provision of mental health and substance use disorder benefits; and

**WHEREAS** whole-person, integrated physical and behavioral health care is recognized as best practice; and

**WHEREAS** the state's medical assistance plan is a fee-for-service plan; and

**WHEREAS** a medical assistance plan that is a fee-for-service plan is not required to meet the requirements of the MHPAEA; and

**WHEREAS** the Department of Health has the power to adopt regulations that ensure the state's medical assistance plan meets or exceeds the MHPAEA's parity requirements;

**BE IT RESOLVED** that the Alaska State Legislature recognizes the need for parity in the provision of mental health and substance use disorder medical assistance benefits to ensure that

- (1) medical assistance benefit recipients have equitable access to care;
- (2) care coordination among medical assistance physical health care providers and behavioral health care providers is streamlined;
- (3) the provision of medical assistance benefits and services is efficient and cost-effective;

(4) the state and people in the state do not overuse emergency rooms and correctional facilities for behavioral health concerns; and

(5) the state has a stable and effective behavioral health workforce; and be it

**FURTHER RESOLVED** that the Alaska State Legislature urges the Department of Health to adopt regulations that ensure parity for medical assistance providers and medical assistance recipients in the provision of mental health and substance use disorder medical assistance benefits and services in the state.