Enrolled Copy H.B. 14

CATASTROPHIC MENTAL HEALTH COVERAGE - SUNSET
ACT
2011 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: James A. Dunnigan
Senate Sponsor: John L. Valentine
LONG TITLE
General Description:
This bill modifies the Insurance Code and the Legislative Oversight and Sunset Act to
address catastrophic mental health coverage.
Highlighted Provisions:
This bill:
removes a catastrophic mental health coverage provision from the Legislative
Oversight and Sunset Act; and
makes technical and conforming amendments.
Money Appropriated in this Bill:
None
Other Special Clauses:
None
Utah Code Sections Affected:
AMENDS:
31A-22-625 , as last amended by Laws of Utah 2010, Chapters 10 and 68
63I-1-231, as last amended by Laws of Utah 2010, Chapters 68 and 319
Posit angeted by the Legislature of the state of Utah:
Be it enacted by the Legislature of the state of Utah: Section 1. Section 31A-22-625 is amended to read:
31A-22-625. Catastrophic coverage of mental health conditions.
(1) As used in this section:

H.B. 14 Enrolled Copy

(a) (i) "Catastrophic mental health coverage" means coverage in a health benefit plan that does not impose a lifetime limit, annual payment limit, episodic limit, inpatient or outpatient service limit, or maximum out-of-pocket limit that places a greater financial burden on an insured for the evaluation and treatment of a mental health condition than for the evaluation and treatment of a physical health condition. (ii) "Catastrophic mental health coverage" may include a restriction on cost sharing factors, such as deductibles, copayments, or coinsurance, before reaching a maximum out-of-pocket limit. (iii) "Catastrophic mental health coverage" may include one maximum out-of-pocket limit for physical health conditions and another maximum out-of-pocket limit for mental health conditions, except that if separate out-of-pocket limits are established, the out-of-pocket limit for mental health conditions may not exceed the out-of-pocket limit for physical health conditions. (b) (i) "50/50 mental health coverage" means coverage in a health benefit plan that pays for at least 50% of covered services for the diagnosis and treatment of mental health conditions. (ii) "50/50 mental health coverage" may include a restriction on: (A) episodic limits; (B) inpatient or outpatient service limits; or (C) maximum out-of-pocket limits. (c) "Large employer" is as defined in 42 U.S.C. Sec. 300gg-91. (d) (i) "Mental health condition" means a condition or disorder involving mental illness that falls under a diagnostic category listed in the Diagnostic and Statistical Manual, as periodically revised. (ii) "Mental health condition" does not include the following when diagnosed as the primary or substantial reason or need for treatment:

(A) a marital or family problem;

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

51

52

53

54

55

56

57

(B) a social, occupational, religious, or other social maladjustment;

Enrolled Copy H.B. 14

58	(C) a conduct disorder;
59	(D) a chronic adjustment disorder;
60	(E) a psychosexual disorder;
61	(F) a chronic organic brain syndrome;
62	(G) a personality disorder;
63	(H) a specific developmental disorder or learning disability; or
64	(I) mental retardation.
65	(e) "Small employer" is as defined in 42 U.S.C. Sec. 300gg-91.
66	(2) (a) At the time of purchase and renewal, an insurer shall offer to a small employer
67	that it insures or seeks to insure a choice between catastrophic mental health coverage and
68	50/50 mental health coverage.
69	(b) In addition to complying with Subsection (2)(a), an insurer may offer to provide:
70	(i) catastrophic mental health coverage, 50/50 mental health coverage, or both at levels
71	that exceed the minimum requirements of this section; or
72	(ii) coverage that excludes benefits for mental health conditions.
73	(c) A small employer may, at its option, choose either catastrophic mental health
74	coverage, 50/50 mental health coverage, or coverage offered under Subsection (2)(b),
75	regardless of the employer's previous coverage for mental health conditions.
76	(d) An insurer is exempt from the 30% index rating restriction in Section
77	31A-30-106.1 and, for the first year only that catastrophic mental health coverage is chosen, the
78	15% annual adjustment restriction in Section 31A-30-106.1, for any small employer with 20 or
79	less enrolled employees who chooses coverage that meets or exceeds catastrophic mental
80	health coverage.
81	(3) An insurer shall offer a large employer mental health and substance use disorder
82	benefit in compliance with Section 2705 of the Public Health Service Act, 42 U.S.C. Sec.
83	300gg-5, and federal regulations adopted pursuant to that act.
84	(4) (a) An insurer may provide catastrophic mental health coverage to a small employer

through a managed care organization or system in a manner consistent with Chapter 8, Health

85

H.B. 14 Enrolled Copy

86	Maintenance Organizations and Limited Health Plans, regardless of whether the insurance
87	policy uses a managed care organization or system for the treatment of physical health
88	conditions.
89	(b) (i) Notwithstanding any other provision of this title, an insurer may:
90	(A) establish a closed panel of providers for catastrophic mental health coverage; and
91	(B) refuse to provide a benefit to be paid for services rendered by a nonpanel provider
92	unless:
93	(I) the insured is referred to a nonpanel provider with the prior authorization of the
94	insurer; and
95	(II) the nonpanel provider agrees to follow the insurer's protocols and treatment
96	guidelines.
97	(ii) If an insured receives services from a nonpanel provider in the manner permitted by
98	Subsection (4)(b)(i)(B), the insurer shall reimburse the insured for not less than 75% of the
99	average amount paid by the insurer for comparable services of panel providers under a
100	noncapitated arrangement who are members of the same class of health care providers.
101	(iii) This Subsection (4)(b) may not be construed as requiring an insurer to authorize a
102	referral to a nonpanel provider.
103	(c) To be eligible for catastrophic mental health coverage, a diagnosis or treatment of a
104	mental health condition must be rendered:
105	(i) by a mental health therapist as defined in Section 58-60-102; or
106	(ii) in a health care facility:
107	(A) licensed or otherwise authorized to provide mental health services pursuant to:
108	(I) Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act; or
109	(II) Title 62A, Chapter 2, Licensure of Programs and Facilities; and
110	(B) that provides a program for the treatment of a mental health condition pursuant to a
111	written plan.
112	(5) The commissioner may prohibit an insurance policy that provides mental health

coverage in a manner that is inconsistent with this section.

113

Enrolled Copy H.B. 14

114	(6) The commissioner shall:
115	(a) adopt rules, in accordance with Title 63G, Chapter 3, Utah Administrative
116	Rulemaking Act, as necessary to ensure compliance with this section; and
117	(b) provide general figures on the percentage of insurance policies that include:
118	(i) no mental health coverage;
119	(ii) 50/50 mental health coverage;
120	(iii) catastrophic mental health coverage; and
121	(iv) coverage that exceeds the minimum requirements of this section.
122	(7) This section may not be construed as discouraging or otherwise preventing an
123	insurer from providing mental health coverage in connection with an individual insurance
124	policy.
125	[(8) This section shall be repealed in accordance with Section 63I-1-231.]
126	Section 2. Section 63I-1-231 is amended to read:
127	63I-1-231. Repeal dates, Title 31A.
128	(1) Section 31A-2-208.5, Comparison tables, is repealed July 1, 2015.
129	(2) Section 31A-2-217, Coordination with other states, is repealed July 1, 2013.
130	[(3) Section 31A-22-625, Catastrophic coverage of mental health conditions, is
131	repealed July 1, 2011.]
132	[(4)] (3) Chapter 42a, Utah Statewide Risk Adjuster Act, is repealed July 1, 2016.