

FINAL RULES

MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT

What you need to know.

On September 9, 2024, the White House announced the issuing of final rules filed jointly by the Department of Labor, Department of Health and Human Services, and Internal Revenue Service implementing parts of the Mental Health Parity and Addiction Equity Act of 2008.

● Next Steps

The rules will take effect for group health plans for plan years starting January 1, 2025. Individual health insurance coverage plans are required to comply with the rules starting January 1, 2026.

- 1 Clinicians should be aware of changes to their patients' health plan network composition and new opportunities for mental health/substance use disorder treatment that may soon be available for patients.
- 2 Clinicians can inform their patients of these new policies and how their access to care may change.

● Opposition

Opposition to the final rules is also expected from insurers, among others. Should a legal challenge be raised against the rules, it may argue that the agencies do not have statutory authority to issue the rules, potentially citing the overturn of 'Chevron Doctrine' in the Supreme Court's 2024 decision in Loper Bright Enterprises v. Raimondo.

● Major Provisions

- Emphasizes that the law **requires no higher restrictions** on access to mental health /substance use disorder care compared to medical/surgical care.
- Plans **cannot issue non-quantitative treatment limitations** (NQTs) for mental health/substance use disorder treatments that are more restrictive than those for medical/surgical treatments. These include:
 - Prior authorization requirements
 - Standards related to network composition
 - Methodologies to determine out-of-network reimbursement rates
- Plans **must evaluate their provider networks** to ensure their compliance with the law, including metrics such as how often prior authorization is required and denied for mental health/substance use disorder services.
- Plans **cannot use discriminatory information**, evidence, or standards that are designed to disfavor access to mental health/substance use disorder care when setting NQTs.
- Optional compliance with the law will be phased out for non-federal government health plans; **compliance will now be required**.