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HOUSE BILL No. 5096

June 16, 2009, Introduced by Reps. Meadows and Sheltrown and referred to the Committee on Health Policy.

A bill to amend 1980 PA 350, entitled "The nonprofit health care corporation reform act," (MCL 550.1101 to 550.1704) by adding section 416e.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 SEC. 416E. A HEALTH CARE CORPORATION THAT ISSUES OR RENEWS IN
- 2 THIS STATE ON OR AFTER JANUARY 1, 2010 A GROUP CERTIFICATE SHALL
- 3 PROVIDE FOR BOTH OF THE FOLLOWING:
- 4 (A) THAT COST-SHARING REQUIREMENTS AND BENEFIT OR SERVICE
- 5 LIMITATIONS FOR OUTPATIENT BIOLOGICALLY BASED MENTAL ILLNESS
- 6 SERVICES DO NOT PLACE A GREATER FINANCIAL BURDEN ON THE MEMBER AND
- 7 ARE NOT MORE RESTRICTIVE THAN THOSE REQUIREMENTS AND LIMITATIONS
- FOR OUTPATIENT MEDICAL SERVICES.
 - (B) THAT COST-SHARING REQUIREMENTS AND BENEFIT OR SERVICE
- LIMITATIONS FOR INPATIENT HOSPITAL BIOLOGICALLY BASED MENTAL

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- 1 ILLNESS SERVICES DO NOT PLACE A GREATER FINANCIAL BURDEN ON THE
- 2 MEMBER AND ARE NOT MORE RESTRICTIVE THAN THOSE REQUIREMENTS AND
- 3 LIMITATIONS FOR INPATIENT HOSPITAL MEDICAL SERVICES.
- 4 (2) SUBSECTION (1) APPLIES IF BOTH OF THE FOLLOWING ARE MET:
- 5 (A) THE BIOLOGICALLY BASED MENTAL ILLNESS IS CLINICALLY
- 6 DIAGNOSED BY A MENTAL HEALTH PROFESSIONAL.
- 7 (B) THE PRESCRIBED TREATMENT IS NOT EXPERIMENTAL OR
- 8 INVESTIGATIONAL, HAVING PROVEN ITS CLINICAL EFFECTIVENESS IN
- 9 ACCORDANCE WITH GENERALLY ACCEPTED MEDICAL STANDARDS.
- 10 (3) SUBSECTION (1) DOES NOT APPLY TO A HEALTH CARE CORPORATION
- 11 TO WHICH ALL OF THE FOLLOWING APPLY:
- 12 (A) THE HEALTH CARE CORPORATION SUBMITS DOCUMENTATION
- 13 CERTIFIED BY AN INDEPENDENT MEMBER OF THE AMERICAN ACADEMY OF
- 14 ACTUARIES TO THE COMMISSIONER SHOWING THAT INCURRED CLAIMS FOR
- 15 DIAGNOSTIC AND TREATMENT SERVICES FOR BIOLOGICALLY BASED MENTAL
- 16 ILLNESS FOR A PERIOD OF AT LEAST 6 MONTHS INDEPENDENTLY CAUSED THE
- 17 HEALTH CARE CORPORATION'S COSTS FOR CLAIMS AND ADMINISTRATIVE
- 18 EXPENSES FOR THE COVERAGE OF ALL OTHER PHYSICAL DISEASES AND
- 19 DISORDERS TO INCREASE BY MORE THAN 1% PER YEAR.
- 20 (B) THE HEALTH CARE CORPORATION SUBMITS A SIGNED LETTER FROM
- 21 AN INDEPENDENT MEMBER OF THE AMERICAN ACADEMY OF ACTUARIES TO THE
- 22 COMMISSIONER OPINING THAT THE INCREASE DESCRIBED IN SUBDIVISION (A)
- 23 COULD REASONABLY JUSTIFY AN INCREASE OF MORE THAN 1% IN THE ANNUAL
- 24 PREMIUMS OR RATES CHARGED BY THE HEALTH CARE CORPORATION FOR THE
- 25 COVERAGE OF ALL OTHER PHYSICAL DISEASES AND DISORDERS.
- 26 (C) THE COMMISSIONER, PURSUANT TO THE ADMINISTRATIVE
- 27 PROCEDURES ACT OF 1969, 1969 PA 306, MCL 24.201 TO 24.328, MAKES

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- 1 THE FOLLOWING DETERMINATIONS FROM THE DOCUMENTATION AND OPINION
- 2 SUBMITTED PURSUANT TO SUBDIVISIONS (A) AND (B):
- 3 (i) INCURRED CLAIMS FOR DIAGNOSTIC AND TREATMENT SERVICES FOR
- 4 BIOLOGICALLY BASED MENTAL ILLNESSES FOR A PERIOD OF AT LEAST 6
- 5 MONTHS INDEPENDENTLY CAUSED THE HEALTH CARE CORPORATION'S COSTS FOR
- 6 CLAIMS AND ADMINISTRATIVE EXPENSES FOR THE COVERAGE OF ALL OTHER
- 7 PHYSICAL DISEASES AND DISORDERS TO INCREASE BY MORE THAN 1% PER
- 8 YEAR.
- 9 (ii) THE INCREASE IN COSTS REASONABLY JUSTIFIES AN INCREASE OF
- 10 MORE THAN 1% IN THE ANNUAL PREMIUMS OR RATES CHARGED BY THE HEALTH
- 11 CARE CORPORATION FOR THE COVERAGE OF ALL OTHER PHYSICAL DISEASES
- 12 AND DISORDERS.
- 13 (4) THIS SECTION DOES NOT PROHIBIT A HEALTH CARE CORPORATION
- 14 FROM DOING ANY OF THE FOLLOWING:
- 15 (A) NEGOTIATING SEPARATELY WITH MENTAL HEALTH CARE PROVIDERS
- 16 ON REIMBURSEMENT RATES AND THE DELIVERY OF HEALTH CARE SERVICES.
- 17 (B) OFFERING CERTIFICATES THAT PROVIDE BENEFITS SOLELY FOR THE
- 18 DIAGNOSIS AND TREATMENT OF BIOLOGICALLY BASED MENTAL ILLNESSES.
- 19 (C) MANAGING THE PROVISION OF BENEFITS FOR THE DIAGNOSIS OR
- 20 TREATMENT OF BIOLOGICALLY BASED MENTAL ILLNESSES THROUGH THE USE OF
- 21 PREADMISSION SCREENING, BY REQUIRING PRIOR AUTHORIZATION BEFORE
- 22 TREATMENT, OR THROUGH THE USE OF ANY OTHER MECHANISM DESIGNED TO
- 23 LIMIT COVERAGE TO THAT TREATMENT THAT IS DETERMINED TO BE
- 24 NECESSARY.
- 25 (D) ENFORCING THE TERMS AND CONDITIONS OF THE CERTIFICATE.
- 26 (5) THIS SECTION DOES NOT APPLY TO ANY CERTIFICATE THAT
- 27 PROVIDES COVERAGE FOR MEDICARE SUPPLEMENT.

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- 1 (6) AS USED IN THIS SECTION:
- 2 (A) "BIOLOGICALLY BASED MENTAL ILLNESS" MEANS SCHIZOPHRENIA,
- 3 SCHIZOAFFECTIVE DISORDER, MAJOR DEPRESSIVE DISORDER, BIPOLAR
- 4 DISORDER, PARANOIA AND OTHER PSYCHOTIC DISORDERS, OBSESSIVE-
- 5 COMPULSIVE DISORDER, AND PANIC DISORDER, AS THOSE TERMS ARE DEFINED
- 6 IN THE DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS
- 7 PUBLISHED BY THE AMERICAN PSYCHIATRIC ASSOCIATION.
- 8 (B) "MENTAL HEALTH PROFESSIONAL" MEANS ANY OF THE FOLLOWING:
- 9 (i) A PHYSICIAN LICENSED TO PRACTICE MEDICINE OR OSTEOPATHIC
- 10 MEDICINE AND SURGERY IN THIS STATE UNDER ARTICLE 15 OF THE PUBLIC
- 11 HEALTH CODE, 1978 PA 368, MCL 333.16101 TO 333.18838.
- 12 (ii) A PSYCHOLOGIST LICENSED TO PRACTICE IN THIS STATE UNDER
- 13 ARTICLE 15 OF THE PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.16101 TO
- 14 333.18838.
- 15 (iii) A MASTER'S SOCIAL WORKER LICENSED UNDER ARTICLE 15 OF THE
- 16 PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.16101 TO 333.18838.
- 17 (iv) A PROFESSIONAL COUNSELOR LICENSED UNDER ARTICLE 15 OF THE
- 18 PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.16101 TO 333.18838.