



New York State Behavioral Health Health Insurance Coverage Parity:

Red Flags for Health Insurance Plan Members

It is important to know that New York State and federal parity laws for mental health (MH) and substance use disorder (SUD) treatment require most comprehensive health insurance plans to cover medically necessary mental health services and to manage your behavioral health benefits as they manage medical and surgical benefits, without additional limitations.

This means that insurance plans are forbidden to require you to “fail first” a lower level of care before they cover treatment recommended by your doctor or therapist, such as inpatient hospitalization.

Other so-called “red-flags” that your health insurance plan may not be complying with these laws, include:

- ✎ Requiring pre-authorization or pre-notification for all SUD or MH services
- ✎ Requiring frequent continuing care review for SUD or MH services or medications, approving only a few days of services before requiring another authorization.
- ✎ Refusing to cover a course of treatment because you are “not improving,” or are “not likely to improve” or only covering services that result in a measurable and substantial improvement in mental health status within a certain number of days.
- ✎ Requiring a written treatment plan for SUD or MH services earlier in the treatment process or more frequently than for medical services.
- ✎ Placing geographic limitations on where a patient can receive SUD or MH services (for example, not covering services received out-of-state) without similar limitations for medical services.
- ✎ Having no in-network SUD or MH providers accepting new patients or within a reasonable distance.
- ✎ Requiring SUD and MH providers to have additional documentation or qualifications for network admission than it has for medical providers.
- ✎ Reimbursing SUD and MH care providers at rates lower than medical providers billing for same services.
- ✎ Setting SUD and MH reimbursement rates using different standards than it uses for medical providers.
- ✎ Not covering residential SUD or MH care.
- ✎ Requiring utilization management for inpatient mental health services for children and youth under age 18 for the first 14 days of coverage
- ✎ Refusing to provide information, like medical necessity criteria and documents explaining health insurance plan standards, when you or your providers request it.

If you are having difficulty accessing care and you think your health insurance plan may not be complying with the law, contact the **Community Health Access to Addiction and Mental Healthcare Project (CHAMP)* Helpline** via phone at **1-888-614-5400**, or email CHAMP at ombuds@oasas.ny.gov.

**CHAMP is the New York State funded ombudsman program established to help New Yorkers navigate health insurance issues and advocate for their rights.*