

This document is a guide for you as an employer to use to ensure your employees and their family members are receiving comprehensive and affordable health insurance coverage for the treatment of Substance Use Disorders (SUD).

This document discusses the following list of benefit coverage and criteria. It can be used to frame discussions with your insurance carrier to ensure your plan is providing appropriate levels of coverage.

- 1) Mental Health Parity
- 2) Medication Coverage
- 3) Ease of Access
- 4) Reporting

Mental Health Parity

The Mental Health Parity Act (MHPA) is legislation that was signed into United States law on September 26, 1996 that requires annual or lifetime dollar limits on mental health benefits to be no lower than any such dollar limits for medical and surgical benefits offered by a group health plan or health insurance issuer offering coverage in connection with a group health plan.

To ensure your plan(s) comply with this Act, we suggest you ask your insurance provider:

- Is there parity in the Plan between coverage for mental health/substance use disorders and the medical/surgery benefits? If not, what is the difference?

Medication Coverage

There are various FDA approved medications used in treating substance use disorders, which have been shown to be more effective for sustaining long term addiction recovery than treatment without medication.

To evaluate the Medication for Treatment (MAT) of SUD coverage under your plan, we suggest you ask your insurance provider:

- Is cost sharing (copayments/coinsurance/deductibles/etc.) waived for any prescriptions treating SUD? (both injectable and oral)
- Is there member cost sharing for an office visit for the purpose of medication distribution?
- Do you waive prior authorization requirements for MAT?
- In addition to covering Nurse Practitioners and MDs, do you cover services provided by Registered Nurses for MAT distribution?
- Please differentiate what drugs/services are covered under the medical plan vs. the prescription benefit.
- Please provide the member cost share for both a 30 day and a 90 day supply SUD medications (i.e.: buprenorphine, methadone, disulfiram, acamprostate, naltrexone)

Ease of Access

Ensuring your plan members can easily access the necessary treatment is essential in working towards recovery.

Examples of questions to ask your insurance provide include

- Do you cover services (such as assessments, medication distribution) and office visits provided by Certified Addiction Nurse Care Managers (CANCM)?
- Do you provide guidance and assistance around quality, reputation, and appropriateness for patients who may seek to live in a “sober house”?
- Do you cover visiting Addiction Nurse Care Managers for home visits post discharge? If so, what are the condition/limits?
- What Disease/Care Management programs do you have in place for the various substance use disorders? (tobacco, alcohol, opioids, marijuana)
- Denied Services for SUD:
 - What are the main/typical reasons services for the treatment for SUD are denied?
 - Can you describe the member appeal process?
 - Is there a person at the Plan who can assist a member through the appeal process? If so, what is their contact information?

Reporting

In order to monitor the care of your employees and their dependents, it is important that your health insurance carrier can provide comprehensive reporting services.

We recommend inquiring about the following reports:

- The number of employees and dependents diagnosed with SUD, by substance (i.e. tobacco, alcohol, opioids, marijuana, etc.)
 - Data by substance categorized by: overall number of members with condition (broken out by subscribers vs. dependents) and total annual cost and count (broken out by pharmacy, office visit, inpatient hospitalization, group counseling, individual counseling, emergency room visit). For example:

SUD by Substance	Total	# of Subscribers	# of Dependents	Pharmacy Cost	Office Visit	Inpatient Hospitalization	Group Counseling	Individual Counseling	Emergency Room Visit	TOTAL
Opioids	#	#	#	\$	\$	\$	\$	\$	\$	\$
Tobacco	#	#	#	\$	\$	\$	\$	\$	\$	\$

- Claims by site of care (i.e. hospital, PCP, specialist, telemedicine)
- Identified “gaps in care” of members with SUD? (Standards of care by condition and Rx).
- What types of standard reports do you provide to help your plan sponsors monitor our members with SUD?
- Are customized reports available if a standard report does not provide this information?

If you would like a more detailed Request for Information (RFI) template to provide to your insurance provider please email the Grayken Center for Addiction Grayken.Center@bmc.org