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New regulations to benefit patients

by [Patrick McCreless](#)

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Operating out of a house on Christine Avenue, licensed counselor Edith Couch prefers a relaxed, setting where clients can comfortably talk. For more than 20 years, Couch has helped many area residents, from people struggling with substance abuse to families on the verge of collapse.

In years past, however, Couch's efforts were somewhat hindered by insurance companies that placed higher costs and more limits on mental health care compared to treatments for physical illnesses. But with new federal regulations on mental health released Friday, more consumers could soon have better coverage for the mental-health and substance-abuse care they need, some health experts say.

"Mental health has never been given much of a chance — insurance coverage has been very little," Couch said. "These new regulations signify recognition by policymakers that mental health treatment is just as important as treatment for any other serious health condition."

The final regulations provide clarifications for the Mental Health Parity Law. Though the law was passed in 2008, it was not fully implemented to give the federal government more time to write and revise the regulations. The government issued interim rules in 2010, however, those still left gaps in explanation for several areas of the law.

"The final rules are designed to address those gaps," said Andrew Sperling, director of federal affairs for the National Alliance of Mental Illness, a Virginia-based nonprofit that advocates for mental health.

In a Tuesday email to The Star, Koko Mackin, spokeswoman for Blue Cross Blue Shield, the largest health insurance provider in Alabama, said her company did not yet know how the new regulations will impact its plans.

"Our 2014 health plans for small businesses are mental health parity compliant under the present interim final regulations," Mackin said. "The new mental health parity final regulations came out Friday and we have not yet completed our analysis of the final rule's impact."

Through the new regulations, insurers are required to provide mental health care benefits on the same terms that they cover physical illnesses.

"Before for instance, insurers used to cap the number patients days for mental health ... or if you got admitted for mental health, you'd need to meet special requirements for treatment," Sperling said. "That's something you'd never dream of doing for something like surgery."

The parity law and the regulations apply just to group health plans, not private, individual plans. Also, the law does not mandate that insurers offer mental health coverage in their plans.

Specifically, the regulations state that mental health residential or outpatient treatments must be covered on par with physical residential and outpatient treatments, such as physical therapy. Also, the regulations state there can be no limits on where a patient gets mental health care. The regulations also indicate that consumers must be given clear information about their mental health benefits and be allowed to appeal if their insurer denies their mental health or substance abuse claim.

Jim Reddoch, commissioner for the Alabama Department of Mental Health, said the new regulations could be beneficial for patients.

"If it does make it more clear on what the protections are and what the coverage is, of course I'd be in favor of that," Reddoch said.

Reddoch said even without the added regulations, the parity law was hailed by mental health advocates as a great step forward.

According to a study the U.S. Department of Health and Human Services released Friday, the law has already improved mental health insurance coverage in the country. For instance, the study shows that in 2008, 84 percent of midsized employers' plans used inpatient day limitations that were more restrictive for mental health and substance abuse care than for medical and surgical conditions. By 2011, only 13 percent of midsized employers' plans had such restrictions for mental health and substance abuse care.

Sperling added that the law so far has not led to any significant insurance cost increases, and he said he expected similar results from the new regulations.

"We have experience with this and what we've found is this does not raise premiums significantly," Sperling said.

Sperling noted, however, that the regulations are not perfect because they do not state whether the law applies to private health plans administered by Medicaid, the federal health insurance program for the poor.

Mickey Turner, executive director for Calhoun-Cleburne Mental Health Center in Anniston, said he was unsure if the new regulations will benefit his facility's patients. About 40 percent of the center's patients are on Medicaid, Turner said.

However, the Affordable Care Act health care reform law could be a benefit for some patients requiring mental health, Turner said. The ACA next year will provide affordable insurance plans for residents who previously could not afford coverage. Those plans, unlike private insurance plans for individuals, must comply with the mental health parity law.

"I don't know how good the coverage will be but if it will help people get some coverage, that's a good thing," Turner said.

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