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| BILL ANALYSIS |

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| C.S.H.B. 2595 |
| By: Price |
| Insurance |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE** In 2017, the legislature passed H.B. 10 into law, creating parity in the handling of insurance benefits and claims for mental health and substance use disorders when compared to coverage for other medical and surgical conditions. H.B. 10 also created the Mental Health Condition and Substance Use Disorder Parity Workgroup. In July 2020, the workgroup issued a progress report which proposes additional recommendations to strengthen parity, specifically the creation of a complaint submission process that will ensure equitable resolution of complaints, provide basic training related to parity rights, and raise the public's awareness through educational materials and a designated awareness month. C.S.H.B. 2595 seeks to implement these recommendations by designating October as Mental Health Condition and Substance Use Disorder Parity Awareness Month, by establishing an integrated parity complaint portal to allow enrollees of a health benefit plan to electronically submit suspected violations, and through the development of educational materials and parity law training. |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS** C.S.H.B. 2595 amends the Government Code to designate October as Mental Health Condition and Substance Use Disorder Parity Awareness Month to increase awareness of and compliance with state and federal rules, regulations, and statutes concerning the availability of, and terms and conditions of, benefits for mental health conditions and substance use disorders. Mental Health Condition and Substance Use Disorder Parity Awareness Month may be regularly observed through appropriate activities in communities. C.S.H.B. 2595 amends the Insurance Code to require the commissioner of insurance to develop and maintain a parity complaint portal that is an integrated system that allows for the enrollee of a health benefit plan to submit complaints of suspected violations of statutory provisions relating to health benefit plan coverage for mental health conditions and substance use disorders. In doing so, the commissioner may develop a new complaint portal or modify an existing complaint portal. The bill sets out requirements for the parity complaint portal with respect to the submission, status, resolution, and processing of complaints. The portal must adhere to national best practices and include materials relating to benefits for certain mental health conditions and substance use disorders, and an enrollee's rights and responsibilities under an applicable health benefit plan. The bill requires the commissioner, in developing the portal, to:* conduct an assessment of complaint portals and similar systems used by other relevant public or private entities; and
* develop best practice standards for complaint submissions and tracking consistent with the findings of the assessment.

The bill requires the Health and Human Services Commission (HHSC) to appoint a liaison to the Texas Department of Insurance (TDI) to receive reports of concerns, complaints, and potential violations submitted through the complaint portal.C.S.H.B. 2595 requires the commissioner, in collaboration with HHSC's ombudsman for behavioral health, to develop educational materials and parity law training sessions regarding the coverage for mental health conditions and substance use disorders. The bill sets out requirements of the commissioner with regard to the materials and training sessions relating to availability and accessibility and the inclusion of relevant third-party organization information. The bill requires the commissioner, in collaboration with the ombudsman, to prepare and submit a report to the appropriate committees of the legislature and the appropriate state agencies on the status of the rights and responsibilities for mental health condition and substance use disorder benefits and resolved and unresolved complaints submitted through the complaint portal and to publish the findings of the report to the complaint portal.  |
| **EFFECTIVE DATE** September 1, 2021. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE**While C.S.H.B. 2595 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.The substitute includes a requirement, which was not included in the original, for HHSC to appoint a liaison to TDI to receive reports of concerns, complaints, and potential violations submitted through the parity complaint portal. The substitute does not include a requirement, which was included in the original, for the commissioner to annually provide updates concerning the status of rights and responsibilities for mental health conditions and substance use disorder benefits.The substitute includes a requirement, which was not included in the original, for the commissioner, in collaboration with HHSC's ombudsman for behavioral health, to prepare and submit a report to the appropriate committees of the legislature and publish the findings of the report to the complaint portal.With regards to the requirement included in the original for the commissioner to develop educational materials and parity law training sessions, the substitute specifies that the commissioner is to do so in collaboration with the ombudsman.In addition to the requirements for the complaint portal also included in the original, the substitute requires the portal to include the commissioner's and ombudsman's report. |
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