

Submitted electronically to: [e-ohpsca-mhpaea-disclosure@dol.gov](mailto:e-ohpsca-mhpaea-disclosure@dol.gov)

Jan. 3, 2017

Office of Health Plan Standards and Compliance Assistance  
Employee Benefits Security Administration  
U.S. Department of Labor  
200 Constitution Ave., NW  
Washington, D.C. 20710

Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
The Hubert H. Humphrey Building  
200 Independence Ave., SW  
Washington, D.C. 20201

Internal Revenue Service  
U.S. Department of the Treasury  
1500 Pennsylvania Ave., NW  
Washington, D.C. 20220

**Re: Request for Comment; Frequently Asked Questions about Affordable Care Act Implementation Part 34 and Mental Health and Substance Use Disorder Parity Implementation**

Dear Sir/Madam:

Magellan Health, Inc., (Magellan) appreciates the opportunity the Departments of Labor (DOL), Health and Human Services (HHS), and the Treasury (“the Departments”) have extended to inform and improve disclosures with respect to mental health and substance use disorder (MH/SUD) benefits. As we shared in our August 2016 comments to the Mental Health and Substance Use Disorder Parity Task Force<sup>1</sup>, Magellan wholeheartedly supports mental health and well-being as a priority focus of the administration. We appreciate the opportunity to share our deep experience as it relates to the Departments’ questions raised in the October 2016 Frequently Asked Questions (FAQs) regarding the Paul Wellstone and Pete Domenici Mental

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1. Magellan Health letter to Ms. Cecilia Muñoz, chair, Mental Health and Substance Use Disorder Parity Task Force (Aug. 31, 2016).

Health Parity and Addiction Equity Act of 2008 (MHPAEA) disclosure process for non-quantitative treatment limitations (NQTLs).

Headquartered in Scottsdale, Ariz., Magellan is a leader in managing the fastest growing, most complex areas of health, including behavioral healthcare services and supports. Our perspective on parity is informed by our more than 40 years of experience providing a tailored spectrum of behavioral health services and employee assistance programs for health plans, employers, and various military and government agencies and public health care programs, including to active-duty service members and their families at more than 160 military installations worldwide, the Medicare Advantage and Medicaid programs, and individuals dually eligible for the Medicare and Medicaid programs (dual eligibles). Magellan also contracts with more than 77,000 credentialed behavioral health providers nationwide and provides behavioral healthcare services to approximately 1.7 million public-sector members<sup>2</sup> through a range of innovative state programs, including a first-of-its-kind specialty health plan in Florida for individuals living with serious mental illness.

We welcome the opportunity to respond to the questions raised in the most recent FAQ regarding the MHPAEA disclosure process with respect to NQTLs and the possible use of a model disclosure form. However, it is worth noting this particular additional guidance may be unnecessary and an inadvertently duplicative effort. With the recent signage of H.R. 34, the 21st Century Cures Act, we recommend the Departments hold off on additional guidance related to model disclosure forms given the Act's provisions to seek public comment on ways to improve consumer access to documents regarding MH/SUD benefits and the methods health plans may use to comply with the MHPAEA requirements for disclosures of NQTLs. These provisions and others included in the Act addressing evaluation and assessment of parity compliance and enforcement should proceed prior to the imposition of any additional requirements related to a model disclosure form. Specifically, we recommend the Departments seek and incorporate public comment on ways to improve consumer access to information, disclosure processes for NQTLs, and a model form. In addition, any other guidance or documents put forth relevant to these issues should be in alignment.

As an experienced behavioral health specialty organization, Magellan is committed to ensuring access to high quality and fully integrated behavioral healthcare services and supports for millions of health plan members served by Magellan on behalf of our customers, including approximately 23.7 million individuals in the commercial sector and 5.2 million through government programs.<sup>3</sup> We are equally committed to the availability of meaningful, consumer-

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2. Membership as of Sep. 30, 2016.

3. Ibid.

friendly information that furthers consumers' access to services and treatment and their understanding of parity. With this in mind, should the Departments proceed separate to the Act, Magellan encourages the Departments to ensure any changes – including additional guidance and the possibility of a model disclosure form – echo this approach and result in the availability of meaningful, consumer-friendly, and usable information presented in simple, clear language that supports consumers' understanding of what services may not be covered and why.

Once again, we thank the Departments for seeking broad-based and experience-driven feedback on MHPAEA and the disclosure process for NQTLs. Should you have any questions about our experience with parity or wish to discuss our comments further, please contact Brian Coyne, vice president of federal affairs, at (202) 437-0678 or [bcoyne@magellanhealth.com](mailto:bcoyne@magellanhealth.com); or, Claire Wulf Winiarek, senior director of public policy, at (860) 507-1918 or [cwulfwiniarek@magellanhealth.com](mailto:cwulfwiniarek@magellanhealth.com).

Sincerely,



Meredith A. Delk, Ph.D., MSW  
Senior Vice President, Government Affairs