To whom it may concern:

I am writing to express comments regarding the proposed “FAQs about Mental Health and Substance Use Disorder Parity Implementation and the 21st Century Cures Act Part XX.” My comments are in specifically in regards to ambiguity surrounding the term “intermediate level of care,” which are discussed in question nine of this FAQ.

I find it very concerning that all of the example NQTL scenarios involving scope of services and provider type all include language referring to a “residential treatment center,” “residential treatment facility,” or simply “residential treatment.” Consider the definition of intermediate treatment found in the MHPAEA final rules:

> These final regulations are expected to maintain or perhaps slightly improve coverage for intermediate levels of care. These services that fall between inpatient care for acute conditions and regular outpatient care can be effective at improving outcomes for people with mental health conditions or substance use disorders. [1]

The intermediate level of care encompasses far more than just residential treatment centers including: outdoor behavioral health, transitional, supervised living, halfway houses, and group homes. This is evidenced by the fact that the National Uniform Billing Committee includes revenue codes for all of these types of providers, which fall under the umbrella of “II Intermediate Care” and/or “Residential Treatment Facility.”

However, insurance plans have refused to acknowledge or provide coverage for services rendered in settings other than “residential treatment centers” despite the fact that many of these providers meet plan requirements for a “provider,” “alternate facility,” or “non-hospital facility.” The failure of the final rules to mention settings other than “residential treatment centers” is therefore failing in its mission to ensure that coverage for intermediate behavioral health treatment is offered at parity with intermediate medical treatment.

As such, I would request that the language of this FAQ and any future FAQs reflect the broader range of intermediate behavioral health facilities instead of exclusively referring to “residential treatment centers.” For the purposes of this FAQ in particular, I would suggest that the language be revised to state “non-hospital inpatient residential treatment” rather than simply “residential treatment.”

If you require any additional clarification or have any questions, please do not hesitate to reach to me by email at brittany@sixricks.com.

Sincerely,

Brittany Ricks