

OFFICE OF FISCAL ANALYSIS

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sSB-384

AN ACT CONCERNING MENTAL HEALTH PARITY, DATA REPORTED BY MANAGED CARE ORGANIZATIONS AND THE ALL-PAYER CLAIMS DATABASE.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 19 \$	FY 20 \$
State Comptroller - Fringe Benefits	GF&TF - Potential Cost	See Below	See Below

Note: GF&TF=General Fund & Transportation Fund

Municipal Impact:

Municipalities	Effect	FY 19 \$	FY 20 \$
Various Municipalities	Potential Cost	See Below	See Below

The bill may result in a cost to the state employee and retiree health plan as well as fully insured municipal plans to the extent that the bill increases utilization of mental health screening services pursuant to section 9(b)(21) of the bill. The potential cost will accrue to the state and municipalities to the extent screenings are conducted during a physical exam or as a result of a referral to another licensed practitioner. The plan currently limits coverage for mental health services to those "...provided by Providers who are certified by the appropriate state agency to provide such services and whose programs for such services have been approved by the Carrier."¹ It is uncertain if screening for a mental or nervous condition as defined by CGS § 38a-488a would be covered at an annual physical exam. Under current law, three screenings specified (e.g. trauma screening, substance use screening, and

¹ Source: *State of Connecticut Health Benefit Plan – Plan Document*.

depression screening) require coverage conducted by a licensed behavioral health professional (CGS §38a-488). The bill does not define “screening”. The fiscal impact to fully-insured municipalities will be reflected in premiums for plan years effective on or after January 1, 2019. Due to federal law, self-insured plans are exempt from state health mandates.²

The bill’s various reporting requirements are not anticipated to result in a fiscal impact to the state or municipal health plans.

The bill is not anticipated to result in a fiscal impact to the Insurance Department from expanded data collection, analysis and reporting requirements. The provisions are similar to existing Department activities and fall within Department’s expertise.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the utilization of services and for fully-insured municipalities, will be reflected in future premiums.

² The state employee and non-Medicare retiree health plan are self-insured and therefore are exempt from state health mandates. However, the state has traditionally adopted all state mandated benefits. Self-insured municipalities are likewise exempt from state health mandates.