34-LS0146\A

SENATE BILL NO. 45

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTY-FOURTH LEGISLATURE - FIRST SESSION

BY SENATORS DUNBAR, Gray-Jackson

Introduced: 1/22/25 Referred: Health and Social Services, Finance

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to medical assistance services; relating to parity in mental health and 2 substance use disorder coverage in the state medical assistance program; and providing 3 for an effective date." 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA: 5 * Section 1. AS 47.07.030 is amended by adding a new subsection to read: 6 (i) In providing the services required under this section, the department shall 7 comply with the mental health or substance use disorder benefit requirements 8 established under 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C. 300gg-26. 9 * Sec. 2. AS 47.07 is amended by adding a new section to read: 10 Sec. 47.07.033. Parity in mental health and substance use disorder 11 **benefits.** The commissioner of health shall implement and ensure compliance with the 12 provisions of 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C. 300gg-26 that are 13 applicable to the state medical assistance program, including 14 (1) evaluating all consumer and provider complaints regarding mental

1 health and substance use disorder coverage for possible parity violations;

(2) performing parity compliance examinations on nonquantitative
treatment limitations, including prior authorization, concurrent review, retrospective
review, step therapy time-based treatment plans, network admission standards,
reimbursement rates, and geographic restrictions; and

6 (3) conducting comparative analyses of how the state medical 7 assistance program designs and applies nonquantitative treatment limitations, as 8 written and in operation, for mental health and substance use disorder coverage and 9 medical and surgical benefits.

10 * Sec. 3. AS 47.07.076 is amended by adding a new subsection to read:

(d) The department shall submit an annual report on mental health and
substance use disorder coverage parity in the state medical assistance program to the
senate secretary and the chief clerk of the house of representatives on or before
March 1 and shall notify the legislature that the report is available. The report must

(1) describe the processes used to develop or select the medical
necessity criteria for mental health and substance use disorder benefits and for medical
and surgical benefits;

(2) identify all nonquantitative treatment limitations that are applied to
mental health and substance use disorder benefits and medical and surgical benefits
within each classification of benefits;

(3) analyze whether the medical necessity criteria and nonquantitative
treatment limitations applied to mental health and substance use disorder benefits are
comparable to the medical necessity criteria and nonquantitative treatment limitations
for medical and surgical benefits, and whether the criteria and limitations are applied
more stringently to mental health and substance use disorder benefits than to medical
and surgical benefits within the corresponding classification of benefits; at a
minimum, the results of the analysis must

(A) identify the factors used to determine when a
nonquantitative treatment limitation will apply to a benefit, including factors
that were considered but rejected;

(B) identify and define the specific evidentiary standards used

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1	to define the factors and any other evidence relied on in designing each
2	nonquantitative treatment limitation;
3	(C) provide the comparative analyses, including the results of
4	the analyses, performed to determine whether processes and strategies used to
5	design each nonquantitative treatment limitation, as written and in operation,
6	applied to mental health and substance use disorder benefits are comparable to
7	and are not applied more stringently than the processes and strategies used to
8	design each nonquantitative treatment limitation to medical and surgical
9	benefits; and
10	(D) disclose the specific findings and conclusions reached by
11	the department that indicate whether the state medical assistance program is in
12	compliance with this section, 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C.
13	300gg-26.
14	* Sec. 4. The uncodified law of the State of Alaska is amended by adding a new section to
15	read:
16	REPORT TO LEGISLATURE. Not later than March 1, 2026, the commissioner of
17	health shall prepare and submit a report to the senate secretary and the chief clerk of the house
18	of representatives and notify the legislature that the report is available. The report must
19	(1) explain the methodology used by the commissioner to determine
20	compliance with 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C. 300gg-26;
21	(2) identify market examinations conducted or completed during the preceding
22	12-month period regarding compliance with parity in mental health and substance use
23	disorder benefits under state and federal laws and summarize the results of the market conduct
24	examinations;
25	(3) detail any educational or corrective actions the commissioner has taken to
26	ensure compliance with 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C. 300gg-26;
27	(4) be written in nontechnical, readily understandable language; and
28	(5) be posted on the publicly available Internet website of the Department of
29	Health and be made available to the public through any other means the commissioner finds
30	appropriate.
31	* Sec. 5. The uncodified law of the State of Alaska is amended by adding a new section to

1 read:

MEDICAID STATE PLAN. The Department of Health shall submit, as necessary for approval by the United States Department of Health and Human Services, amendments to the state plan under AS 47.07.040 to comply with the requirements of the mental health or substance use disorder benefits established under 26 U.S.C. 9812, 29 U.S.C. 1185a, and 42 U.S.C. 300gg-26.

7 * Sec. 6. The uncodified law of the State of Alaska is amended by adding a new section to
8 read:

9 CONDITIONAL EFFECT; NOTIFICATION. (a) Sections 1 - 4 of this Act take effect 10 only if, and to the extent that, the United States Department of Health and Human Services 11 approves amendments submitted in accordance with sec. 5 of this Act on or before 12 December 31, 2025.

(b) The commissioner of health shall notify the revisor of statutes in writing within 30
days after the United States Department of Health and Human Services approves amendments
to the state plan.

* Sec. 7. If secs. 1 - 4 of this Act take effect, they take effect the day after the United States
Department of Health and Human Services approves the amendments to the state plan under
sec. 6 of this Act.