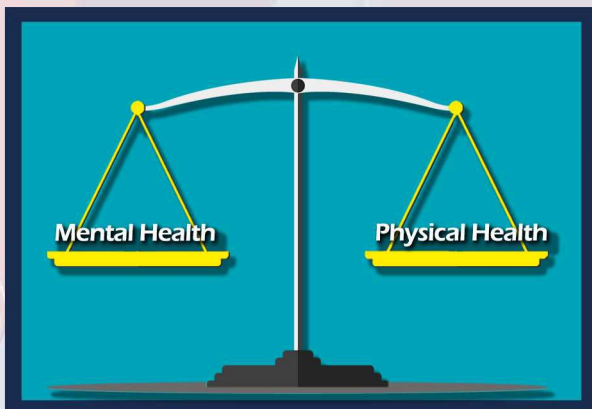


What is MHPAEA?

The Mental Health Parity and Addiction Equity Act 2008 (MHPAEA) is a federal law requiring health plans to apply similar financial and treatment limits to mental health/ substance use disorder benefits and medical surgical benefits.

What is parity?

Parity means the financial cost-sharing requirements for mental health/substance use disorder benefits (such as deductibles, co-payments, coinsurance, and out-of-pocket limitations) must be comparable but not identical to those for medical surgical. Parity also applies to rules regarding care management (authorization for treatment) and treatment limitations.



Facts to Know

- Although benefits may differ across plans, parity requires that the processes related to plan benefit determinations be comparable between medical and mental health services. The Affordable Care Act contributed to parity by eliminating annual and lifetime dollar limits for mental health and substance use disorder benefits.
- A complex formula is used to determine the maximum cost-share that an insurer may charge for mental health or substance use disorder services. The copay or coinsurance for some medical services may still be lower than the mental health service cost-share.
- If you have an HMO plan, your insurance restricts non-emergency care to *in-network* doctors and facilities. This means you will need to go to an in-network facility in order to receive mental health services unless you are experiencing an emergency or you have a need that can't be met by the available in-network doctors or facilities.
- For concerns about **early inpatient discharge**, request to speak to the hospital patient advocate or ombudsman.

For more information about MHPAEA:
difi.az.gov/content/mental-health-parity-1

Jake's Law / S.B. 1523

In 2020, the Arizona legislature passed S.B. 1523. S.B. 1523 is named in honor of Jake Machovsky, an Arizona teen who lost his life to suicide in 2016 after battling mental health issues. The law addresses several different aspects of mental health care in Arizona:

Appeal or Complaint?

Having difficulty with the mental health benefits under your health insurance policy?

Some problems require you to **APPEAL**, while others call for a **COMPLAINT**.

Generally speaking, if an insurance company **denies** a request for service or claim as *not covered* or as *not medically necessary* that should be submitted as an **APPEAL**.

Other health insurance problems should be filed as a **COMPLAINT**.

For instructions on how to Appeal contact the customer service number on the back of your insurance card or for more information visit difi.az.gov/health-care-appeals

To file a complaint, visit difi.az.gov/file-complaint-against-insurance-entity

RESOURCES

National Suicide Prevention Lifeline:
1-800-273-TALK (8255)

Suicide and Crisis Hotlines by County

Maricopa County- Served by Mercy Care:
1-800-631-1314
602-222-9444

Cochise, Graham, Greenlee, La Paz Pima,
Pinal, Santa Cruz & Yuma County
served by Arizona Complete Health
Complete Care Plan:
1-866-495-6735

Apache, Coconino, Gila, Mohave, Navajo
and Yavapi County served by
Health Choice Arizona:
1-877-756-4090

Gila River and Ak-Chin Indian Communities:
1-800-25-3449

Salt River Pima Maricopa Indian Community:
1-855-331-6432

**For additional resources please call
211
211arizona.org**

For more information regarding
Mental Health Parity and Addiction
Equity Act (MHPAEA) visit



difi.az.gov/content/mental-health-parity-1

Mental Health Parity and Addiction Equity Act (MHPAEA)

