



Insurance Coverage Issues for Mental Health and Addiction Services

For the Sentinel Project at Seton Hall Law School

February 6, 2015

**Wardell Sanders, President
New Jersey Association of Health Plans**



Trends in Coverage since 12/31/13

Market	12/31/2013	3/31/2014	6/30/2014	9/30/2014	12/31/2014	12/31/13 to current
Individual	146,095	186,402	259,449	261,477	Not available	115,382
Small Group (2-50 ees)	647,374	599,037	562,398	521,484	Not available	-125,890
TOTAL	793,469	785,439	821,847	782,961	Not available	-10,508

Medicaid	1,284,481	1,439,902	1,537,983	1,627,075	1,680,938	396,457
----------	-----------	-----------	-----------	-----------	-----------	---------



2015 NJ individual market carriers

On "Marketplace"	Off "Marketplace"
AmeriHealth	Aetna
Health Republic	AmeriHealth
Horizon	Cigna
Oscar	Health Republic
United/Oxford	Horizon
	Oscar
	United/Oxford



2015 NJ small employer market carriers

On "Marketplace"	Off "Marketplace"
AmeriHealth	Aetna
Horizon	AmeriHealth
	Cigna
	Health Republic
	Horizon
	Oscar
	United/Oxford



Behavioral Health/Substance Abuse benefit expansions

- SHBP/SEHBP in plan year 2014 does not “opt out” of federal mental health parity.
- All coverage in NJ’s individual market became subject to full mental health parity for plans issued on or after 1/1/14.
- Removal of caps on autism services for PT/OT/ST and removal of the 21-year old age limit required for both the individual and small group markets as of 7/1/14.



NJAHP Recent Collaborations

- **Mental Health Association of NJ:** In partnership with the MHANJ, NJAHP published a consumer Q&A on the in-network exception process.
- **Autism NJ, Autism Speaks:** Working on coding issues, credentialing, UM, *etc.*
- **NJ Association of Mental Health and Addiction Agencies:** Quarterly meetings on issues of concern.



Value and UM Requirements

- 80% minimum loss ratio standard for carriers in the individual and small group markets (\$claims paid/\$premium).
- The Institute of Medicine: about 30% of all health care spending was wasted on unnecessary services, excessive administrative costs, fraud, and other problems.
- UM designed to determine the appropriate level of care by using evidence-based practice standards.
- NJ law establishes an external appeal process for UM. Carriers prevail in about 65% of cases.



Wardell Sanders

President

NJ Association of Health Plans

wsanders@njahp.org

609.581.8237