

House Amendment 8035

Amendment Text

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1 1 Amend [House File 2080](#) as follows:
1 2 #1. By striking everything after the enacting
1 3 clause and inserting the following:
1 4 "Section 1. NEW SECTION. 514C.19 MENTAL HEALTH
1 5 AND SUBSTANCE ABUSE COVERAGE.
1 6 1. Notwithstanding the uniformity of treatment
1 7 requirements of section 514C.6, a group policy or
1 8 contract providing for third-party payment or
1 9 prepayment of health or medical expenses shall provide
1 10 mental health and substance abuse treatment coverage
1 11 benefits and shall not impose limitations on financial
1 12 terms for coverage of services for serious mental
1 13 illnesses or substance abuse if similar limitations
1 14 are not imposed on the coverage benefits for services
1 15 for medical or surgical conditions.
1 16 2. For purposes of this section, unless the
1 17 context otherwise requires:
1 18 a. "Serious mental illness" means the following
1 19 disorders, as defined by the American psychiatric
1 20 association's diagnostic and statistical manual of
1 21 mental disorders:
1 22 (1) Schizophrenia.
1 23 (2) Schizo-affective disorder.
1 24 (3) Bipolar disorder.
1 25 (4) Major depressive disorder.
1 26 (5) Obsessive-compulsive disorder.
1 27 (6) Autism.
1 28 (7) Pervasive developmental disorders.
1 29 (8) Panic disorder.
1 30 (9) Paranoia and other psychotic disorders.
1 31 (10) Eating disorders, including but not limited
1 32 to bulimia nervosa and anorexia nervosa.
1 33 b. "Substance abuse" means a pattern of
1 34 pathological use of alcohol or a drug that causes
1 35 impairment in social or occupational functioning, or
1 36 that produces physiological dependency evidenced by
1 37 physical tolerance or by physical symptoms when the
1 38 alcohol or drug is withdrawn.
1 39 2. This section shall not apply to accident-only,
1 40 specific disease, short-term hospital or medical,
1 41 hospital confinement indemnity, credit, dental,
1 42 vision, Medicare supplement, long-term care, basic
1 43 hospital and medical-surgical expense coverage as
1 44 defined by the commissioner, disability income
1 45 insurance coverage, coverage issued as a supplement to
1 46 liability insurance, workers' compensation or similar
1 47 insurance, automobile medical payment insurance, or
1 48 individual accident or sickness policies issued
1 49 pursuant to chapter 513C.
1 50 3. A third-party payor may manage the benefits
2 1 provided through common methods including, but not
2 2 limited to, providing payment of benefits or providing
2 3 care and treatment under a capitated payment system,
2 4 prospective reimbursement rate system, utilization
2 5 control system, incentive system for the use of least
2 6 restrictive and least costly levels of care, a
2 7 preferred provider contract limiting choice of

2 8 specific provider, or any other system, method, or
2 9 organization designed to ensure services are medically
2 10 necessary and clinically appropriate.

2 11 4. A group policy or contract covered under this
2 12 section, at a minimum, shall provide for thirty
2 13 inpatient and sixty outpatient days annually. The
2 14 policy or contract may also include deductibles,
2 15 coinsurance, or copayments if such deductibles,
2 16 coinsurance, or copayments are applicable to other
2 17 medical or surgical services coverage under the policy
2 18 or contract. It is not a violation of this section if
2 19 the policy or contract excludes entirely from coverage
2 20 benefits the cost of providing the following:

2 21 a. Marital, family, educational, developmental, or
2 22 training services.

2 23 b. Care that is substantially custodial in nature.

2 24 c. Services and supplies that are not medically
2 25 necessary or clinically appropriate.

2 26 d. Experimental treatments.

2 27 5. The commissioner, by rule, shall increase the
2 28 mental health and substance abuse lifetime limit in
2 29 the individual market guaranteed standard product to
2 30 one hundred thousand dollars.

2 31 6. A group policy is exempt from this section upon
2 32 submitting to the commissioner evidence demonstrating
2 33 a premium increase for the policy term in excess of
2 34 three percent as a result of the requirements of this
2 35 section.

2 36 7. This section applies to third-party payment
2 37 provider contracts or policies delivered, issued for
2 38 delivery, continued, or renewed in this state on or
2 39 after January 1, 2001.

2 40 8. This section is repealed effective July 1,
2 41 2003."

2 42 #2. Title page, by striking line 2 and inserting
2 43 the following: "costs for mental illness and
2 44 substance abuse treatment".

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2 48 OSTERHAUS of Jackson

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3 6 WITT of Black Hawk

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3 18 BUKTA of Clinton

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3 22 FOEGE of Linn

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