

SB 70-FN - AS INTRODUCED

2021 SESSION

21-1033

08/10

SENATE BILL

70-FN

AN ACT relative to insurance coverage for emergency behavioral health services for children and young adults.

SPONSORS: Sen. Sherman, Dist 24; Sen. Prentiss, Dist 5; Sen. Hennessey, Dist 1; Sen. Rosenwald, Dist 13; Sen. Soucy, Dist 18; Sen. Bradley, Dist 3; Sen. Whitley, Dist 15; Sen. Carson, Dist 14; Rep. Marsh, Carr. 8; Rep. Woods, Merr. 23

COMMITTEE: Commerce

ANALYSIS

This bill requires commercial insurance carriers to cover the initial assessment and intervention without prior authorization for children in psychiatric distress.

This bill also delays any prior authorization requirements on longer term treatment for children in psychiatric distress for 72 hours.

Explanation: Matter added to current law appears in ***bold italics***.
 Matter removed from current law appears ~~[in brackets and struckthrough]~~
 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to insurance coverage for emergency behavioral health services for children and young adults.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 Findings. The general court finds that New Hampshire recognizes the imperative to fully
2 support mental health treatment for our children through the development of a comprehensive
3 system of care. The New Hampshire 10-year Mental Health Plan and the passage in 2019 of SB 14
4 have laid the foundation for this level of support. With COVID-19, improving access to mental
5 health care has developed into a crisis, with children in psychiatric distress boarding in our
6 emergency rooms in record numbers for days or weeks. The general court recognizes that
7 appropriate rapid assessment, intervention, and in-home and community-based treatment may well
8 avoid the need for presentation to the emergency room in the first place or preclude the need for
9 transfer from an emergency room to an inpatient psychiatric facility. This evidence-based, best
10 practice intervention has also been demonstrated in national studies to be ultimately cost saving and
11 achieve better outcomes for children and families. For this small number of New Hampshire
12 children in mental health crisis, these services are currently covered by Medicaid but not by the
13 commercial carriers. This act continues the state's commitment to addressing the mental health
14 needs of children by requiring commercial carriers to cover the initial assessment and intervention
15 without prior authorization, recognizing that these steps are critical to preventing and addressing
16 psychiatric distress in children. This act also delays any prior authorization requirements on longer
17 term treatment such as residential or intensive home-based treatment for 72 hours to allow for
18 immediate home and community based intervention.

19 2 New Section; Emergency Mental Health Services for Persons 21 Years of Age and Younger.
20 Amend RSA 417-F by inserting after section 4 the following new section:

21 417-F:5 Emergency Mental Health Services for Persons 21 Years of Age and Younger.

22 I. Each insurer that issues or renews any individual policy, plan, or contract of accident or
23 health insurance providing benefits for medical, rehabilitation, or hospital expenses, shall provide to
24 certificate holders of such insurance, who are residents of this state, coverage for expenses arising
25 from the use of emergency services by a person 21 years of age or under suffering a mental health
26 crisis. For purposes of this section, "emergency services" shall include:

27 (a) Behavioral health or mental health crisis assessments, including both in person and
28 tele health services.

29 (b) Behavioral health crisis intervention, including mobile or stationary crisis services.

30 (c) Behavioral health crisis stabilization services.

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1 (d) Behavioral health intensive in home services.

2 (e) Behavioral health residential treatment services.

3 II. No prior authorization shall be required for subparagraphs I(a), I(b), or I(c).

4 III. A prior authorization of up to 72 hours may be required for subparagraphs I(d) and I(e).

5 3 Effective Date. This act shall take effect 60 days after its passage.

**SB 70-FN- FISCAL NOTE
AS INTRODUCED**

AN ACT relative to insurance coverage for emergency behavioral health services for children and young adults.

FISCAL IMPACT: ☒ State ☒ County ☒ Local ☐ None

STATE:	Estimated Increase / (Decrease)			
	FY 2021	FY 2022	FY 2023	FY 2024
Appropriation	\$0	\$0	\$0	\$0
Revenue	\$0	Indeterminable	Indeterminable	Indeterminable
Expenditures	\$0	Indeterminable	Indeterminable	Indeterminable
Funding Source:	☒ General Government Funds ☐ Education ☐ Highway ☒ Other - Various			

COUNTY:

Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	Indeterminable	Indeterminable	Indeterminable

LOCAL:

Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill requires commercial insurance carriers to cover the initial assessment and intervention without prior authorization for children in psychiatric distress. This bill also delays any prior authorization requirements on longer term treatment for children in psychiatric distress for 72 hours. The Insurance Department indicates under the ACA, costs associated with new benefit mandates, for coverage purchased through the Exchange, must be borne by the State. The Department assumes current law requires issuers to cover the cost of these emergency services and the new requirement involves the limits on prior authorization. Therefore, the Department concludes that this bill would not be considered a new benefit mandate. Eliminating, or easing, insurers' ability to use prior authorization may result in increased incidences of these claims. This increase in claim costs may result in increased insurance premiums, or changes in benefit designs. Any impact on premium tax revenue is difficult to predict as employers may buy down (reduce coverage) instead of paying increased premiums.

It is assumed that any fiscal impact would occur after July 1, 2021.

AGENCIES CONTACTED:

Insurance Department