

January 1, 2010 Brings Mental Health Parity

Source: Dr. Marlene M. Maheu
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Under this new law, 113 million people across the country will have the right to non-discriminatory mental health coverage, including 82 million individuals enrolled in self-funded plans (regulated under ERISA), who cannot be assisted by State parity laws. The law will help bring an end to health insurance benefits inequity between mental health / substance abuse disorders and medical/surgical benefits for group health plans with more than 50 employees.

What Specifically Does it Do?

The new law amends the Mental Health Parity Act of 1996 to require that a group health plan of 50 or more employees (or coverage offered in connection with such a plan)-that provides both medical and surgical benefits and mental health or substance use benefits – to ensure that financial requirements and treatment limitations applicable to mental health/substance use disorder benefits are no more restrictive than those requirements and limitations placed on medical / surgical benefits.

Equity coverage will apply to all financial requirements, including deductibles, copayments, coinsurance, and out-of-pocket expenses, and to all treatment limitations, including frequency of treatment, number of visits, days of coverage, or other similar limits.

Life's Simple 7

Source: American Heart Association

Heart Disease is the No. 1 killer of Americans. We can reduce heart disease by promoting a health diet and lifestyle. Getting information from credible sources can help you make smart choices that will benefit your long-term heart health.

For the first time, the American Heart Association has defined what it means to have ideal cardiovascular health, identifying seven health and behavior factors that impact health and quality of life. We know that even simple, small changes can make a big difference in living a better life. Known as "Life's Simple 7", these steps can help add years to your life:

1. Don't Smoke
2. Maintain a Healthy Weight
3. Engage in Regular Physical Activity
4. Eat a Healthy Diet
5. Manage High Blood Pressure
6. Take Charge of Cholesterol; and
7. Keep Blood Sugar, or glucose, at healthy levels

Within a few minutes with Life's Simple 7 you can learn the state of your heart and what you can do to live a better life. To get started on your Simple 7 challenge go to the American Heart Association website at:<http://mylifecheck.heart.org> take the 7 minute assessment test and you're on your way. From there you can find action plans that will help you get informed, change your behaviors and move you closely to your individual health goals.

Did you Know????

The average age for a first heart attack for men is 66 years

Almost half of men who have a heart attack under age 65 die within 7 years

One in 3 female adults has some form of cardiovascular disease

February is American Heart Month

Source: Centers for Disease Control

Heart Disease is the leading cause of death in the United States and is a major cause of disability. In 2009, an estimated 785,000 Americans had a new coronary attack, and about 470,000 will have a recurrent attack. About every 25 seconds, an American will have a coronary event, and about one every minute will die from one.

The chance of developing coronary heart disease can be reduced by taking steps to prevent and control factors that put people at greater risks. Additionally, knowing the signs and symptoms of heart attack are crucial to the most positive outcomes after having a heart attack. People who have survived a heart attack can also work to reduce their risk of another heart attack or a stroke in the future.

Disease & Conditions that put your Heart at Risk

Conditions that affect your heart or increase your risk of death or disability include arrhythmia, heart failure, and peripheral artery disease (PAD). High cholesterol, high blood pressure, obesity, diabetes, tobacco use, and secondhand smoke are also risk factors associated with heart disease

Know Your Signs and Symptoms

Some heart attacks are sudden and intense; however, most heart attacks start slowly, with mild pain or discomfort. Often people affected aren't sure what's wrong and wait too long before getting help. Here are some signs that can mean a heart attack is happening:

- **Chest discomfort.** Most heart attacks involve discomfort in the center chest that last more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain.
- **Discomfort in other areas of the upper body.** Symptoms include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- **Shortness of breath.** May occur with or without chest discomfort.
- **Other signs.** These may include breaking out in a cold sweat, nausea, or lightheadedness.

Mental Health Parity - cont.

This new law builds on the current 1996 parity law, which already requires parity coverage for annual and lifetime dollar limits.

A plan may not apply separate cost sharing requirements or treatment limitations to mental health and substance use disorder benefits.

Mental health and substance use disorder benefits are defined broadly to mean benefits with respect to services for mental health conditions and substance use disorders, as defined under the terms of the plan and in accordance with applicable Federal and State Law.

If a plan offers two or more benefit packages, the requirements of this Act will be applied separately to each package.

As under the current federal parity law, mental health or substance use benefit coverage is not mandated. However, if a plan offers such coverage, it must be provided at parity in accordance with this Act.

Out-of-Network Benefits

A group health plan (or coverage) that provides out-of-network coverage for medical/surgical benefits must also provide out-of-network coverage, at parity, for mental health / substance abuse.

Compliance Corner: Updates for your Use

Source: Agency Fuel / Neace Lukens

2009 was a year of legislative changes affecting health and welfare plans. Many of the new laws were implemented in 2009 with some scheduled for implementation in 2010. Employers should review their benefit programs and documents to ensure that they are in compliance with the new laws.

Some of 2009 legislative highlights:

- COBRA Subsidy
- Genetic Information Nondiscrimination (GINA)
- New HIPAA Rules regarding Business Associate Agreements – HI-TECH Act
- Mental Health Parity Equity Act
- Michelle's Law
- Benefits for Military Employees and Families
- Medicare Reporting Rules
- Excise Tax Reporting Requirements

Neace Lukens realizes that many times the implementation of new legislative regulations may be difficult to understand. We strive to continually keep you up to date on the latest changes and to help you ensure compliance with state and federal regulations.

Please visit our website at www.neacelukens.com and choose the link to Regulatory and Compliance Updates. The site is updated regularly to keep you abreast of all the new federal and state laws that impact your organization.

If you have specific questions regarding some of the new legislation please contact your Neace Lukens representative who will be glad to assist you.

Excise Tax Reporting Requirements

Group health plans are responsible for compliance with a number of federal laws, such as COBRA, HIPAA Portability, GINA, MHPAEA, Michelle's Law and the Newborn's and Mothers' Health Protection Act. If a group health plan does not comply with these requirements, the employer maintaining the plan is subject to an excise tax. Employers are also subject to an excise tax if they do not satisfy comparable contribution rules for health Savings account ("HSAs") and Archer medical savings accounts ("MSAs"). The Internal Revenue Service (IRS) has issued final regulations on reporting and paying the applicable excise tax, which are effective January 1, 2010.

Excise taxes must be reported on IRS Form 8928, "Return of Certain Excise Taxes Under Chapter 43 of the Internal Revenue Code." The due date for the filing and payment of the tax varies depending on the rules violated and the responsible entry. The excise tax may be waived if the failure in not discovered when exercising reasonable diligence, or is due to reasonable cause and is timely corrected. A failure is corrected if it is retroactively undone to the extent possible and the affected beneficiary is places in a financial position as good as he or she would have been in if the failure had not occurred.

CAFETERIA PLAN REGULATIONS

The Internal Revenue Service issued proposed regulations regarding cafeteria plans in August 2007. These regulations provide guidance regarding written plan document requirements, reimbursable expenses, nondiscrimination testing and timing of reimbursements. Although the regulations are not final, employers may rely on them in their good faith compliance efforts. Final regulations have been expected for some time, but have not yet been released. No guidance has been provided on when regulations will be finalized. In anticipation of final regulations, employers may want to review their current plan documents and compare them with the proposed regulations.