

1828-S

Sponsor(s): House Committee on Financial Institutions & Insurance (originally sponsored by Representatives Schual-Berke, Pflug, Cody, Hankins, Linville, Skinner, Cooper, Alexander, Ruderman, Delvin, McDermott, Ericksen, Campbell, Santos, Haigh, Quall, Upthegrove, G. Simpson, Hatfield, Kessler, Conway and Kenney)

Brief Description: Requiring that insurance coverage for mental health services be at parity with medical and surgical services.

HB 1828-S - DIGEST

(SUBSTITUTED FOR - SEE 2ND SUB)

Finds that the costs of leaving mental disorders untreated or undertreated are significant, and often include: Decreased job productivity, loss of employment, increased disability costs, deteriorating school performance, increased use of other health services, treatment delays leading to more costly treatments, suicide, family breakdown and impoverishment, and institutionalization, whether in hospitals, juvenile detention, jails, or prisons.

Finds that the potential benefits of improved access to mental health services are significant, and declares that it is not cost-effective to treat persons with mental disorders differently than persons with medical and surgical disorders.

Declares an intent to require that insurance coverage be at parity for mental health services, which means this coverage be delivered under the same terms and conditions as medical and surgical services.