

Carrier Information:

Name:

Contact Name:

Contact Telephone Number:

Contact Email:

Line of Business:

Contract Type:

Benefit Plan:

Plan Information:

Identify the five health benefit plans with the highest enrollment for each product offered by the carrier in the individual, small, and large group markets. Provide the form numbers, approval dates, and SERFF tracking numbers for all forms comprising the entire contract of insurance for the health benefit plan.

Benefit Classifications:

- (a) List each covered service under the plan in the table below. Indicate whether the covered service is treated as M/S or MH/SUD, and identify which of the following classifications or sub-classifications the covered service has been assigned to: In Network Inpatient; Out of Network Inpatient; In Network Outpatient (OR: In Network Outpatient-Office; In Network Outpatient-All Other); Out of Network Outpatient (OR: Out of Network Outpatient-Office; Out of Network Outpatient-All Other); Emergency; or Prescription.

Covered Service	M/S or MH/SUD	Benefit Classification

- (b) Explain the methodology used to assign M/S and MH/SUD benefits to each classification and/or sub-classification.

For each NQTL provided below, provide the detailed comparative analysis as described in the template below.

1. Definition of Medical Necessity

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

2. Prior Authorization Review Process

Include all services for which prior authorization is required. Describe any step therapy or “fail first” requirements and requirements for submission of treatment request forms or treatment plans.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

3. Concurrent Review Process

Including frequency and penalties for all services. Describe any step therapy or “fail first” requirements and requirements for submission of treatment required forms or treatment plans.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

4. Retrospective Review Process

Including timeline and penalties.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

5. Emergency Services

*The Emergency Services category is intended to encompass NQTLs that are applicable to emergency services, but which are not separately reported under one of the other NQTL categories on the Analysis Report form. If the applicability of a particular NQTL to emergency services is being reported under one of the other NQTL categories, do not include information on that NQTL under this separate Emergency Services category.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to all medical/surgical benefits or all MH/SUD benefits for the Emergency benefit classification, or only certain services within such classification, in the table above. If the NQTL applies only to certain services within the Emergency classification, list each covered service to which the NQTL applies.

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification of benefits or to apply the NQTL to certain identified services within such classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

6. Pharmacy Services

*The Pharmacy Services category is intended to encompass NQTLs that are applicable to pharmacy services, but which are not separately reported under one of the other NQTL categories on the Analysis Report form. If the applicability of a particular NQTL to pharmacy services is being reported under one of the other NQTL categories, do not include information on that NQTL under this separate Pharmacy Services category.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to all medical/surgical benefits or all MH/SUD benefits for the Prescription benefit classification, or only certain services within such classification, in the table above. If the NQTL applies only to certain services within the Prescription classification, list each covered service to which the NQTL applies.

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification of benefits or to apply the NQTL to certain identified services within such classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

7. Prescription Drug Formulary Design

How are formulary decisions made for the diagnosis and medically necessary treatment of medical, mental health and substance use disorder conditions? Describe the pertinent pharmacy management processes, including, but not limited to, cost-control measures, therapeutic substitution and step therapy. What disciplines, such as primary care physicians, internists, pediatricians and specialty physicians (e.g., psychiatrists) and pharmacologists, are involved in the development of the formulary for medications to treat medical, mental health, and substance use disorder conditions?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to all medical/surgical benefits or all MH/SUD benefits for the Prescription benefit classification, or only certain services within such classification, in the table above. If the NQTL applies only to certain services within the Prescription classification, list each covered service to which the NQTL applies.

- (c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

8. Case Management

What case management services are available? What case management services are required? What are the eligibility criteria for case management services?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

9. Process for Assessment of New Technologies

Definition of experimental/investigational. Qualifications of individuals evaluating new technologies. Evidence consulted in evaluating new technologies.

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

10. Standards for Provider Credentialing and Contracting

Is the provider network open or closed? What are the credentialing standards for physicians? What are the credentialing standards for licensed nonphysician individual providers? What are the credentialing standards for hospitals and facilities? Specify type of provider and standards (e.g., nurse practitioners, physician assistants, psychologists, clinical social workers)?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

- (c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

11. Exclusions for Failure to Complete a Course of Treatment

Does the plan exclude benefits for failure to complete a course of treatment?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

12. Restrictions that Limit Duration or Scope of Benefits for Services

Does the plan restrict the geographic location in which covered services can be received (e.g., service area, within the state, within the U.S.)? Does the plan restrict the type(s) of facilities in which members can receive covered services?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

13. Restrictions for Provider Specialty

Does the plan restrict the types of provider specialties that can provide certain M/S and/or MH/SUD covered services?

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

14. Reimbursement for INN Providers, OON Providers, INN Facilities, OON Facilities (separately)

Step 1

(a) Provide a description of the plan’s applicable NQTLs as applied to medical/surgical and MH/SUD benefits in the table below.

NQTL’s Applicable to Med/Surg Benefits	NQTL’s Applicable to MH/SUD Benefits

(b) For each NQTL listed in Step 1 (a), identify whether the NQTL is applicable to medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below. Indicate whether the NQTL applies by classification and sub-classification by entering “Yes” or “No” in the appropriate box. If the NQTL applies only to certain services within such classification and/or sub-classification, list each covered service to which the NQTL applies.

Classifications and Sub-Classifications							
Is NQTL applied to In Network Inpatient classification?	Is NQTL applied to Out of Network Inpatient classification?	Is NQTL applied to In Network Outpatient-Office sub-classification?	Is NQTL applied to Out of Network Outpatient-Office sub-classification?	Is NQTL applied to In Network Outpatient-All Other sub-classification?	Is NQTL applied to Out of Network Outpatient-All Other sub-classification?	Is NQTL applied to Emergency classification?	Is NQTL applied to Prescription classification?
[Identify all Applicable NQTLs for each classification or sub-classification.]							

(c) For each NQTL listed in the Step 1(b), explain the methodology used to determine whether to apply the NQTL to either the entire classification and/or sub-classification of benefits or to apply the NQTL to certain identified services within such classification and/or sub-classification.

Step 2

For each NQTL listed in Step 1, identify the factors and the source for each factor used to determine that it is appropriate to apply each NQTL to each classification, sub-classification or certain services within such classification or sub-classification for both MH/SUD and M/S benefits. Also, identify factors that were considered, but rejected. If any factor was given more weight than another, what is the reason for the difference in weighting? (§15-144(e)(1)).

Step 3

Each factor must be defined. Identify and define the specific evidentiary standard(s) for each of the factors identified in Step 2 and any other evidence relied upon to design and apply each NQTL. Also, identify the source for each evidentiary standard. (§15-144(e)(2)).

Step 4

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, as written. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(3)).

Step 5

Provide the comparative analyses performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, in operation. The comparative analyses shall include the results of any audits and reviews, and an explanation of the methodology. (§15-144(e)(4)).

Step 6

Identify the measures used to ensure comparable design, development and application of each NQTL that is implemented by the carrier and any entity delegated by the carrier to manage MH benefits, SUD benefits, or M/S benefits on behalf of the carrier. (§15-144(e)(5)).

Step 7

Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

Disclosure Requirements

Identify the process used to comply with the Parity Act Disclosure Requirements for MH benefits, SUD benefits, and M/S benefits. (§15-144(e)(7)):

Describe the process for disclosing the criteria used for a medical necessity determination for MH and SUD benefits to current or potential members, or to a contracting provider, upon request.

Describe the process for disclosing the reasons for a denial of benefits for MH and SUD.

Describe the process for disclosing plan documents that contain information about the processes, strategies, evidentiary standards and any other factors used to apply a NQTL for MH/SUD and M/S benefits in connection with a member's request for group plan information and for purposes of filing an internal coverage or grievance matter and appeals.

MARKET CONDUCT ACTION
CERTIFICATE OF COMPLIANCE

Pursuant to Code of Maryland Regulations (“COMAR”) 31.04.20.05 E., I hereby certify to the best of my knowledge, information, and belief, that the information hereto submitted to the Maryland Insurance Administration (“Administration”) represents a full, complete and truthful response to the Maryland Insurance Commissioner’s (“Commissioner”) in response to the NQTL report required under § 15-144, Insurance Article, Annotated Code of Maryland.

I further attest that I am an authorized officer/representative of the Company, that I have undertaken an adequate inquiry to provide this certification to the Commissioner, and am authorized to bind the Company to the responses provided.

Company Officer Signature: _____
Print Name: _____
Company: _____
Title: _____
Date: _____