

**State of Kansas Response:  
MCO KanCare 3.0 Mental Health Parity and Addiction Equity Act (MHPAEA) Analysis  
December 13, 2024**

**United Healthcare Community Plan (UHC)**

**Overview**

Pursuant to federal law 42 CFR 438.3 (n)(2) and as noted in item I.A. 1.07, if the state is providing any services to MCO enrollees using a delivery system other than the MCO delivery system, the state must provide documentation of how the requirements of 42 CFR part 438, subpart K regarding parity in Mental Health and Substance Use Disorder Benefits (MH/SUD) are met with the submission of the MCO contract. Based on a preliminary review of the MCO MHPAEA Analysis that identified initial deficiencies, the State's response is from our request for MCO submission to address those deficiencies of their MHPAEA Analysis. This is in preparation for the implementation of the KanCare 3.0 contract.

**State Initial Findings**

**Steps 2, Define MH, SUD, and M/S Benefits, and Step 3, Define the Four Benefit Classifications and Map Benefits:**

- Definitions of MH/SUD and M/S conditions are not consistent with State definitions.
- Definitions of the four benefit classifications are not consistent with State definitions.
- Analysis did not include mapping of benefits to condition (MH, SUD, and/or M/S), benefit classification (IP, OP, EC, and/or PD), and benefit package.

**Step 5, Identify and Analyze NQTLs:**

- Did not include all five of the State-required NQTLs for analysis, missing:
  - Access to OON providers.

**State Response**

**Step 2: Definitions of MH, SUD, and M/S Benefits**

UHC reports, the plan uses the definitions from 42 CFR 438.900 for all benefit packages specifically for medical/surgical, mental health and substance use disorder benefits. The plan also exhibited in their definitions consistency with the most current version of the ICD and State guidelines. ***State responds, UHC definitions are now consistent with State guidelines.***

**Step 3: Definitions of Four Benefit Classifications**

UHC reports, the plan uses the definitions of the four-benefit classifications from 42 CFR 438.910 (b)(2) for all benefit packages specifically for Inpatient, Outpatient, Emergency Care and Prescription Drugs. Although, these could be further defined by the plan, overall, the ***State responds, UHC definitions are more consistent with State guidelines.***

**Step 3: Mapping of Benefits to Condition (MH, SUD, and M/S) Benefit Classification and Benefit Classification (IP, OP, EC, and PD), and Benefit Package**

UHC submitted a large table that maps all covered medical/surgical, mental health, and substance use disorder benefits by classification (inpatient, outpatient-including office visits, emergency care, and prescription drugs) and benefit package. ***State responds, UHC table submission is consistent with State guidelines and 42 CFR 438.910 (b)(2).***

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**Step 5: Include All Five of the State-required NQTLs for analysis-i.e.: Access to OON Providers**

UHC reports, plan language for both M/S and MH/SUD allows members to seek an exception and receive services from an out-of-network (OON) providers at the in-network benefit level. Language was shown from the plan's member handbook for this member allowance and noted the plan's network adequacy standards are reviewed with an implementation plan that meets contractual State specific network adequacy requirements. ***State responds, UHC submission now includes all five-state required NQTLs for analysis, including access to OON providers.***

**Summary**

UHC MHPAEA Analysis submission has also exhibited that the plan agrees to no cost limits for any services and will be available to all eligible Kansas Medicaid members pursuant to federal law, ensuring there is parity between mental health, substance use disorder and medical surgical benefits. The State of Kansas accepts the UHC submission of their MCO KanCare 3.0 MHPAEA Analysis and has found it to be adequate. We will continue to work with UHC plan for further development and monitoring of their MHPAEA Analysis.