



SB 824-1: Behavioral Health Parity Reporting

Jesse Ellis O'Brien

Department of Consumer and Business Services



Background: HB 3046 (2021)

- Annual behavioral health parity reporting requirement for health insurance carriers
- Reported data elements enable comparisons between coverage of behavioral health and medical / surgical services
- DCBS publishes an annual report based on this data. These reports and related information can be found at this URL: <https://dfr.oregon.gov/business/reg/health/pages/mental-health-parity.aspx>

HB 3046: Sunset provisions

- Section 7 repeals some but not all of the required data elements in health insurance carrier reports as of 1/1/25
- Specifically, quantitative data such as:
 - Claim denial and appeal rates
 - Numbers of in-network and out-of-network claims
 - Median reimbursement rates for different provider types
- The only remaining reporting covers non-quantitative treatment limits

SB 824-1: Continuing parity data reporting

- DCBS and stakeholders have found the quantitative data to be illuminating and useful
- Without this data, annual reports will be much less informative
- -1 amendments bring back the data elements subject to the sunset without change

Example #1: In-network claims

- Behavioral health claims have historically shown higher out-of-network utilization, which may indicate difficulties in finding in-network providers.
- Our reporting has illustrated year-over-year progress in the percentage of in-network claims for behavioral health:
 - 2021: 83.71%
 - 2022: 89.33%
 - 2023: 94.75%
- These trends are essential for identifying potential access issues.

Example #2: Provider reimbursement

- Reported data has revealed disparities in reimbursement between behavioral health and medical/surgical services:
 - For behavioral health, median reimbursement for a 60-minute office visit is **68.71%** more than for a 30-minute visit. For medical/surgical, the equivalent percentage is **99.4%**
 - **54.2%** of behavioral health services reimbursed less than 150% of Medicare, compared to **21.56%** for medical/surgical
- This data can help clarify the scope and sources of divergent reimbursement trends.



Questions?