Introduced by Assembly Member Jackson

February 17, 2023

An act to add Section 1374.725 to the Health and Safety Code, and to add Section 10144.58 to the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 1451, as introduced, Jackson. Behavioral health crisis treatment. Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan or health insurer that provides hospital, medical, or surgical coverage shall provide coverage for medically necessary treatment of mental health and substance use disorders, under the same terms and conditions applied to other medical conditions, as specified. Existing law also includes requirements for timely access to care, including mental health services, including a requirement that a health care service plan or health insurer provide or arrange for the provision of covered health care services in a timely manner appropriate for the nature of the enrollee's or insured's condition consistent with good professional practice.

This bill would require a health care service plan contract or health insurance policy issued, amended, renewed, or delivered on or after January 1, 2024, to provide coverage for treatment of a behavioral health crisis that is identified during an appointment at a contracted facility

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where an enrollee or insured is receiving treatment from a contracted provider for a medical condition, as specified. The bill would authorize treatment for the behavioral health crisis to be provided at the contracted facility, if the facility has the appropriate staff to provide that care. The bill would require the treatment to be provided without preauthorization, and would authorize the provider or facility to use same-day billing to obtain reimbursement for both the medical and behavioral health services provided to the enrollee or insured. Because a violation of the bill's requirements by a health care service plan would be a crime, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1374.725 is added to the Health and 2 Safety Code, to read:

1374.725. (a) A health care service plan contract issued, amended, or renewed on or after January 1, 2024, that provides coverage for medically necessary treatment of mental health and substance use disorders shall cover treatment for a behavioral health crisis as provided in this section.

- (b) During an appointment at a contracted facility, at which an enrollee is receiving treatment from a contracted provider for a medical condition, and it is the provider's medical judgment that the enrollee also shows signs of a behavioral health crisis, treatment for the behavioral health crisis may also be provided at the contracted facility, if the facility has the appropriate staff to provide that care.
- (c) Treatment for a behavioral health crisis pursuant to this section shall not require preauthorization. The provider or facility may use same-day billing to obtain reimbursement for both the medical and behavioral health services provided to the enrollee.
- (d) A health care service plan shall provide reimbursement for services provided pursuant to this section in compliance with the

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requirements for timely payment of claims, as required by this chapter.

- SEC. 2. Section 10144.58 is added to the Insurance Code, to read:
- 10144.58. (a) A health insurance policy issued, amended, or renewed on or after January 1, 2024, that provides coverage for medically necessary treatment of mental health and substance use disorders shall cover treatment for a behavioral health crisis as provided in this section.
- (b) During an appointment at a contracted facility, at which an insured is receiving treatment from a contracted provider for a medical condition, and it is the provider's medical judgment that the insured also shows signs of a behavioral health crisis, treatment for the behavioral health crisis may also be provided at the contracted facility, if the facility has the appropriate staff to provide that care.
- (c) Treatment for a behavioral health crisis pursuant to this section shall not require preauthorization. The provider or facility may use same-day billing to obtain reimbursement for both the medical and behavioral health services provided to the insured.
- (d) A health insurer shall provide reimbursement for services provided pursuant to this section in compliance with Section 10123.13.
- SEC. 3. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIIIB of the California Constitution.