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.

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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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**

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.

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

(d) 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.

<u>Step 2</u>
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)).

<u>Step 3</u>
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)).

<u>Step 4</u>
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

<u>Step 5</u>
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§15-144(e)(4)).

<u>Step 6</u>
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)).

<u>Step 7</u>
Disclose the specific findings and conclusions reached by the carrier that indicate compliance with the Parity Act. (§15-144(e)(6)).

6. **Pharmacy Services**

Include all services for which prior authorization is required, any step therapy or "fail first" requirements, and any other NQTLs.

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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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 medical/surgical or MH/SUD benefits for each applicable benefit classification and sub-classification in the table below.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, _as written_) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, _in operation_. (§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.

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

(d) 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.

<u>**Step 2**</u>
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)).

<u>**Step 3**</u>
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)).

<u>**Step 4**</u>
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

<u>**Step 5**</u>
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§15-144(e)(4)).

<u>**Step 6**</u>
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)).

<u>**Step 7**</u>
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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5
Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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.

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

(d) 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, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>as written</u>) (§15-144(e)(3)).

Step 5

Provide the comparative analyses, including the methodology and results of any audits and reviews, performed and relied upon to determine whether each NQTL is comparable to and no more stringently applied, <u>in operation</u>. (§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)).

<u>Disclosure Requirements</u>

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: _____