

**Mental Health Parity and Addiction Equity Act  
Disclosure**

*This document includes standard responses to questions related to Mental Health Parity (MHP) and Non-Quantitative Treatment Limitations (NQTL). This communication is not intended, nor should it be construed, as legal advice. Federal and state laws and regulations are subject to change. The content provided is for informational purposes only and does not constitute medical advice. Decisions about medical care should be made by the doctor and patient. Please note, your plan documents govern all benefit determinations and in the case of conflict with this document your plan controls. Always refer to the plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the ID card. The following explanations apply to both Medical/Surgical benefits and Mental Health/Substance Use Disorder benefits unless stated otherwise.*

Why does my health plan require Prior Authorization for prescription drugs?

Medical/Surgical Benefits	Mental Health/Substance Use Disorder Benefits
<p>The Plan Golden Rule Insurance (GRIC), as an affiliate company under United Healthcare (UHC); applies this specific NQTL which is managed by Optum Rx. There are some states in which the Plan GRIC only applies this NQTL towards the Opioid treatment programs. Prior Authorization for the prescription drug programs, is an approval process from your health insurance plan before you get coverage for prescription drugs. Prior Authorization is used to:</p> <ul style="list-style-type: none"> <li>• Help members receive safe, effective, and appropriate treatment based on their specific health care needs</li> <li>• Monitor and prevent potential over-use of prescription drugs</li> <li>• Prevent pharmacy billing errors, and promote cost effective prescription drug availability</li> <li>• Determine whether the prescription drug is covered by your benefit plan, as described under the Plan’s Medical Necessity terms/rules</li> </ul>	

What is Step Therapy and how does it affect Prior Authorization?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>Step Therapy requires you to first try a therapeutic equivalent (similar) or more cost-effective drug (prescription) for a given condition before receiving coverage for more costly drug(prescription).</p> <p>Step Therapy may be required before your health plan provides Prior Authorization approval for certain prescription drugs.</p>	

What factors and sources of information are involved in determining if Prior Authorization is required?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>The Plan Golden Rule Insurance Company (GRIC) is an affiliate company under United Healthcare (UHC). UHC may be used to manage prescription drugs covered under the pharmacy benefits. UHC on behalf of the Plan may use factors which can include:</p> <ul style="list-style-type: none"> <li>• Assessment of the prescription drug’s place in therapy</li> <li>• Availability of clinically similar lower cost medications to treat the condition</li> <li>• Evaluation of the value of implementing Prior Authorization</li> <li>• Relative safety and effectiveness</li> <li>• Prevention of off-label use or unproven uses</li> </ul> <p>Sources of information used include:</p> <ul style="list-style-type: none"> <li>• State and/or Federal regulations and guideline</li> <li>• Review of scientific (clinical) evidence: This can be defined as, peer-reviewed medical literature, including clinical studies, drug comparison studies, pharmacoeconomic studies, outcomes research data, published clinical practice guidelines, and comparisons of effectiveness</li> <li>• Nationally recognized evidence-based guidelines and benchmarks: The Food and Drug Administration (FDA)-approved product labeling, side effects, potential for off-label use, and claims data analysis as relevant</li> </ul>	

What is a Prescription Drug List (PDL) (also called a Formulary)?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>A Prescription Drug List (PDL) is a list of the most commonly prescribed medications. It includes both brand-name and generic prescription medications approved by the FDA. Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket.</p> <p>Drug products are included in the PDL with the goal of appropriate use and access to therapeutic drugs. Coverage and tiering are based on evaluation of medical/clinical information, utilization, economics, and availability of other medication options.</p>	

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What factors and sources are involved in determining if a drug is included on a Prescription Drug List (PDL)?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>The Plan Golden Rule Insurance Company (GRIC), as an affiliate company under United Healthcare (UHC), may for prescription drugs covered under the pharmacy benefit use UHC’s established process and policies. UHC may on behalf of the Plan use the below list of factors. The factors used to place drugs on the PDL for mental health/substance use disorder prescription drugs are the same and no more strict than the factors used to place medical/surgical prescriptions drugs on the PDL. The factors that may be included in both are:</p> <ul style="list-style-type: none"> <li>• Assessment of the prescription drug’s place in therapy</li> <li>• Available therapeutic equivalent, described as similar effectiveness and side effects</li> <li>• Evaluation of the value of implementing Prior Authorization</li> <li>• Relative safety and effectiveness</li> </ul> <p>Sources of information used include:</p> <ul style="list-style-type: none"> <li>• State and/or Federal regulations and guideline</li> <li>• Review of scientific (clinical) evidence: This can be defined as, peer-reviewed medical literature, including clinical studies, drug comparison studies, pharmacoeconomic studies, outcomes research data, published clinical practice guidelines, and comparisons of effectiveness</li> <li>• Nationally recognized evidence-based guidelines and benchmarks: The Food and Drug Administration (FDA)-approved product labeling, side effects, potential for off-label use, and claims data analysis as relevant</li> </ul>	

When Prior Authorization is performed, to start Step Therapy or reviews of the Prescription Drug List (PDL), is mental health/ substance use disorder treated differently than medical/ surgical “as written” in policy?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>No. There are comparisons done regularly, and the results have found that the processes are equal. The same factors, standards, and sources of information are used for certain mental health/substance use disorder drugs which require Prior Authorization, Step Therapy, or are placed on the Prescription Drug List (PDL), and are no more strict than certain medical/surgical drugs that require Prior Authorization, Step Therapy, or are placed on the Prescription Drug List (PDL) “as written” in policy.</p>	

Are mental health/substance use disorder decisions made any differently than medical/surgical decisions in practice (“in operation”)?

Medical/Surgical Benefits	Mental Health / Substance Use Disorder Benefits
<p>No. There are steps in place to make sure that both medical/surgical and mental health/substance use disorder decisions are consistently made. A standard process is used to make sure that the rules of the Mental Health Parity and Addiction Equity Act (MHPAEA) are followed, and if any errors are found we have steps planned we will take to fix it.</p>	