ENROLLMENT(S)

(5)



COUNCIL OF THE DISTRICT OF COLUMBIA

NOTICE

D.C. LAW 12-108

"Drug Abuse, Alcohol Abuse, and Mental Illness Insurance Coverage Temporary Amendment Act of 1998"

Pursuant to Section 412 of the District of Columbia Self-Government and Governmental Reorganization Act, P.L. 93-198 "the Act", the Council of the District of Columbia adopted Bill No. 12-512, on first and second readings, January 6, 1998 and February 3, 1998, respectively. Following the signature of the Mayor on February 19, 1998, pursuant to Section 404(e) of "the Act", and was assigned Act No. 12-286, and published in the March 27, 1998, edition of the D.C. Register (Vol. 45 page 1736) and transmitted to Congress on March 10, 1998 for a 30-day review, in accordance with Section 602(c)(1) of the Act.

The Council of the District of Columbia hereby gives notice that the 30-day Congressional Review Period has expired, and therefore, cites this enactment as D.C. Law 12-108, effective May 8, 1998.

LINDA W. CROPP Chairman of the Council

Dates Counted During the 30-day Congressional Review Period:

Mar.

10,11,12,13,16,17,18,19,20,23,24,25,26,27,30,31

Apr.

1,21,22,23,24,27,28,29,30

May

1,4,5,6,7

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AN ACT

D.C. ACT 12-286

Codification
District of
Columbia
Code
1998 Supp.

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA FEBRUARY 19, 1998

To amend, on a temporary basis, the Drug Abuse, Alcohol Abuse, and Mental Illness Insurance Coverage Act of 1986 to comply with the mental parity mandates of the Mental Health Parity Act of 1986.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "Drug Abuse, Alcohol Abuse, and Mental Illness Insurance Coverage Temporary Amendment Act of 1998".

- Sec. 2. The Drug Abuse, Alcohol Abuse, and Mental Illness Insurance Coverage Act of 1986, effective February 28, 1986 (D.C. Law 6-195; D.C. Code § 35-2301 et seq.), is amended as follows:
- (a) Section 2 (D.C. Code § 35-2301) is amended by adding new paragraphs (8A), (10A), (10B), (11A), (12A), and (19A) to read as follows:

Note, Section 35-2301

- "(8A) "Individual market" means the market for health insurance coverage offered to individuals other than in connection with a group health plan.
- "(10A) "Large employer" means, in connection with a group health plan with respect to a calendar year and a plan year, an employer who employed an average of at least 15 employees on business days during the preceding year and who employs at least 2 employees on the first day of the plan year.
- "(10B) "Large group market" means the health insurance market under which individuals obtain health insurance (directly or through any arrangement) on behalf of themselves (and their dependents) through a group health plan maintained by a large employer.
- "(11A) "Medical or surgical benefits" means benefits with respect to medical or surgical services as defined under the terms of the plan or coverage, but does not include mental health benefits.
- "(12A) "Mental health benefits" means benefits with respect to mental health services, as defined under the terms of the plan or coverage, but does not include benefits with respect to treatment of substance abuse or chemical dependency.

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"(19A) "Small group market" means the health insurance market under which individuals obtain health insurance coverage (directly or through any arrangement) on behalf of themselves (and their dependents) through a group health plan maintained by a small employer.".

(b) Section 3 (D.C. Code § 35-2302) is amended by adding a new subsection (i) to read as follows:

Note, Section 35-2302

- "(i) When a large group health plan offers a participant or beneficiary 2 or more benefit package options under the plan, the requirements of this act must be applied separately to each option.".
 - (c) Section 6 (D.C. Code § 35-2305) is repealed.
 - (d) A new section 6a is added to read as follows:

"Sec. 6a. Exemptions.

- Note, Section 35-2305
- "(a) Methods of determining levels of payment or reimbursement for services, or for the type of facility charge eligible for payment or reimbursement pursuant to this act, shall be consistent with those for physical illnesses in general and shall take into consideration usual, customary, and reasonable charges for those services. Except as otherwise provided in section 5(b), deductible or copayment plans, and limits on total amounts payable to an individual in a calendar year or lifetime payment limits may be applied; provided, however, that the inpatient and outpatient benefits set forth in section 5 shall be provided for health plans issued in the individual market and small group market with a lifetime payment limit of not less than \$80,000 or 1/3 of the lifetime maximum for physical illness, whichever is greater; and for health plans issued in the large group market, the inpatient and outpatient benefits set forth in section 5 shall be applied with the same lifetime and annual limits for medical, surgical, and mental benefits.
- "(b) If the cost of complying with the mental health provisions of subsection (a) of this section for large group markets results in at least a 1% increase in the cost of the plan, then the group health plan (or health insurance offered in connection with a group health plan) is exempt from meeting those mental health benefits parity provisions.
- "(c) When a group health plan is exempt from complying with the mental health benefits parity provisions in subsection (b) of this section, it shall comply with the individual and small group market requirements in subsection (b) of this section.
- "(d) Nothing in this section shall be construed as requiring health maintenance organizations to provide any greater level of covered benefits than the level required of insurers.".
 - Sec. 3. Fiscal impact statement.

This act will have no fiscal impact on the adopted Budget and Financial Plan of the District government.

Sec. 4. Effective date.

(a) This act shall take effect following approval by the Mayor (or in the event of veto by

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the Mayor, action by the Council to override the veto), approval by the Financial Responsibility and Management Assistance Authority as provided in section 203(a) of the District of Columbia Financial Responsibility and Management Assistance Act of 1995, approved April 17, 1995 (109 Stat. 116; D.C. Code § 47-392.3(a)), a 30-day period of Congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Code § 1-233(c)(1)), and publication in the District of Columbia Register.

(b) This act shall expire after 225 days of its having taken effect.

Cháirman

Council of the District of Columbia

Mayor

District of Columbia

APPROVED: February 19, 1998



COUNCIL OF THE DISTRICT OF COLUMBIA

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Secretary to the Council

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