

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight
200 Independence Avenue SW
Washington, DC 20201



April 28, 2022

Denis Wirtalla - WirtallaDE@aetna.com
Stacey Hirschhorn - HirschhornSS@aetna.com
Aetna Life Insurance Company
151 Farmington Ave, RW61
Hartford, CT 06156

Re: Aetna Life Insurance Company – Texas – HIOS #48161
Final Determination Letter - Mental Health Parity and Addiction Equity Act (MHPAEA)
Non-Quantitative Treatment Limitation (NQTL) Comparative Analysis Review –
Concurrent review treatment limitations for inpatient, out-of-network services

Dear Mr. Wirtalla and Ms. Hirschhorn:

On behalf of the Centers for Medicare & Medicaid Services (CMS), this notice is being sent to advise you that a review of the Corrective Action Plan (CAP) and additional comparative analysis submitted to address the instances of non-compliance noted in the MHPAEA NQTL Analysis Review (Review) is complete. The purpose of the Review was to assess Aetna Life Insurance Company – Texas’ compliance with the following requirements under Title XXVII of the Public Health Service Act (PHS Act) for the specific NQTL comparative analysis reviewed:

42 U.S.C. § 300gg-26, 45 C.F.R. § 146.136 and 45 C.F.R. § 147.160 - Parity In Mental Health And Substance Use Disorder Benefits. The Review covered the 2021 plan year for concurrent review treatment limitations for inpatient, out-of-network services.

CMS conducted this Review pursuant to PHS Act § 2726(a)(8)(A) and (B), as added by Section 203 of Title II of Division BB of the Consolidated Appropriations Act, 2021.¹ CMS contracted with Examination Resources, LLC to conduct the Review in conjunction with CMS.

On August 26, 2021, CMS provided an initial determination letter of non-compliance to Aetna Life Insurance Company – Texas and requested a CAP and additional comparative analysis to demonstrate compliance. After review, CMS has determined that the CAP and the additional comparative analysis submitted by Aetna Life Insurance Company – Texas adequately addressed the instances of non-compliance previously identified during this specific Review. As part of the

¹ Pub. L. 116-260 (Dec. 27, 2020).

CAP submission, Aetna Life Insurance Company – Texas 1) removed the impermissible continued stay and discharge criteria discussed in the initial determination letter and replaced the LOCAT criteria with LOCUS criteria on June 1, 2021 (ALIC_MHPAEA NQTL Analysis Determination Response Letter 100821, Pg. 2); 2) performed a self-audit to identify any claims/members impacted by the impermissible continued stay and discharge criteria within scope of the Review and found no impacted claims/members; and 3) removed references to LOCAT criteria no longer in use from external-facing websites and replaced with LOCUS criteria.

CMS's findings detailed in this letter pertain only to the NQTL under review and do not bind CMS (or any other government agency or entity) in any subsequent or further review of other Plan provisions or their application for compliance with governing law, including MHPAEA. If additional information is provided to CMS regarding this NQTL or Plan, CMS reserves the right to conduct an additional review for compliance with MHPAEA or other applicable PHS Act requirements.

CMS will include a summary of the comparative analysis and the results of this Review in its annual report to Congress pursuant to PHS Act § 2726(a)(8)(B)(iv).

Sincerely,

Mary Nugent
Director, Compliance and Enforcement Division
Oversight Group
Center for Consumer Information and Insurance Oversight
Centers for Medicare & Medicaid Services

cc: Texas Department of Insurance