

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



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June 3, 2025

Teamsters Local 856 Health & Welfare Trust Fund

Leslie Radcliffe  
Client Services Manager  
lradcliffe@nwadmin.com

Re: Final Determination Letter - Mental Health Parity and Addiction Equity Act (MHPAEA) Non-Quantitative Treatment Limitation (NQTL) Comparative Analysis Review – Prior authorization for outpatient, out-of-network services.

Dear Ms. Radcliffe:

On behalf of the Centers for Medicare & Medicaid Services (CMS), this notice is being sent to inform you that a MHPAEA NQTL Analysis Review (Review) is complete. The purpose of this Review was to assess Teamsters Local 856 Health & Welfare Trust Fund’s (Plan) compliance with the following requirements under Title XXVII of the Public Health Service Act (PHS Act) and its implementing regulations for the specific NQTL comparative analysis reviewed:

Section 2726 of the PHS Act, 45 C.F.R. § 146.136<sup>1</sup> - Parity In Mental Health And Substance Use Disorder Benefits (MHPAEA and its implementing regulations).

The Review covered prior authorization for outpatient, out-of-network services for the 2023 plan year (hereinafter referred to as “the NQTL”).

CMS conducted this Review pursuant to sections 2726(a)(8)(A) and (B) of the PHS Act, as added by section 203 of Title II of Division BB of the Consolidated Appropriations Act, 2021.<sup>2</sup> CMS contracted with Examination Resources, LLC to assist CMS with conducting this Review.

CMS reviewed the Plan’s Summary Plan Description and noted that prior authorization was not required during the period under review for any outpatient, out-of-network mental health and substance use disorder services. Accordingly, this Review is closed.

CMS’ findings detailed in this letter pertain only to the Plan and NQTL under review and do not bind CMS (or any other government agency or entity) in any subsequent or further review of

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<sup>1</sup> In this document, references to 45 C.F.R. § 146.136 refer to the regulations applicable during the 2023 plan year.

<sup>2</sup> Pub. L. 116-260 (Dec. 27, 2020).

other plan provisions or their application for compliance with governing law, including MHPAEA and its implementing regulations. If additional information is provided to CMS regarding this NQTL or the Plan, CMS reserves the right to conduct an additional review for compliance with MHPAEA or other applicable PHS Act requirements.<sup>3</sup>

CMS will include a summary of the comparative analysis and the results of this Review in its annual report to Congress pursuant to section 2726(a)(8)(B)(iv) of the PHS Act. In addition, CMS posts all Final Determination Letters to our webpage at <https://www.cms.gov/marketplace/private-health-insurance/consumer-protections-enforcement>.

Sincerely,

Michelle  
Koltov -S

Digitally signed by  
Michelle Koltov -S  
Date: 2025.05.29  
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Michelle Koltov  
Deputy Director, Division of Plan and Issuer Enforcement  
Oversight Group  
Center for Consumer Information and Insurance Oversight  
Centers for Medicare & Medicaid Services

cc: Charles Scully  
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<sup>3</sup> See PHS Act section 2726(a)(8)(B)(i). See also 45 C.F.R. § 150.303.