What are my Rights as a Consumer?

Each health plan has an appeals process. You, your provider, or therapist can appeal decisions about medical necessity, parity diagnoses or benefits payable if you disagree with your health plan. Details about your health plan’s appeals process can be obtained by calling your member customer service department. If you do not receive a satisfactory result, you may file a complaint with the Colorado Division of Insurance.

For more information, call:

- Your Health Plan Provider
- Your Employer
- Colorado Division of Insurance 303-894-7490 or 800-930-3745
- Mental Health America of Colorado 720-208-2220 or 800-456-3249

This publication has been produced by a consortium of the following mental health advocacy, consumer and professional organizations:

- Colorado Behavioral Healthcare Council
- Colorado Psychiatric Society
- Colorado Psychological Association
- Federation of Families for Children’s Mental Health ~ Colorado Chapter
- Mental Health America of Colorado
- NAMI Colorado
- WE CAN! of Colorado
- National Assoc. of Social Workers ~ Colorado Chapter
What are “Parity” Laws?

Mental health parity means to provide insurance coverage for mental health treatment that is equal to that which is offered for physical conditions.

Equality in coverage includes:
- Co-payments
- Deductibles
- Limits on number of outpatient visits
- Limits on hospital days

Perhaps most importantly of all, laws are finally beginning to follow science in recognizing that mental health is an healthcare issue no different than asthma or heart disease or a broken leg. It is treatable, it is affordable, and it is absolutely necessary for overall health and wellness.

Colorado Parity Law

- Applies to plans with 50 or more employees; exempts individual health plans and self-insured employers.
- Only mental health or substance-use conditions stipulated in the legislation must be covered at parity with medical coverage. The stipulated conditions are:
  - Post-Traumatic Stress Disorder (PTSD)
  - Drug and Alcohol Disorders
  - Dysthymia
  - Cyclothymia
  - Social Phobia
  - Agoraphobia with Panic Disorder
  - General Anxiety Disorder
  - Anorexia Nervosa and Bulimia Nervosa (exclusive of Residential Treatment)
- Continues parity for the following conditions included under past legislation: Schizophrenia, Schizoaffective Disorder, Bipolar Disorder, Major Depressive Disorder, Specific Obsessive-Compulsive Disorder and Panic Disorder.
- Effective as of January 1, 2008

Federal Parity Law

- Applies to group health plans of 51 or more employees; self-insured plans are included in the law.
- When a mental health or substance-use condition is covered, it must be at parity with medical coverage (except to the extent that a state parity law requires broader coverage). Specifically, it prohibits group health plans that offer coverage for any mental health or substance-use conditions from imposing treatment limitations and financial requirements on those benefits that are stricter than for medical and surgical benefits.
- If a plan offers out-of-network benefits for medical or surgical care, it must also offer out-of-network coverage for mental health and addiction treatment and provide services at parity.
- Strong state parity and consumer protection laws are preserved while extending parity protection to 82 million more people who are not protected by state laws and 31 million in plans that are subject to state regulation.
- Effective for most plans January 1, 2010