

STATE OF NEW MEXICO OFFICE OF SUPERINTENDENT OF INSURANCE



SUPERINTENDENT OF INSURANCE
Alice T. Kane

DEPUTY SUPERINTENDENT
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UPDATED BULLETIN 2024-021

February 24, 2025

TO: ALL MAJOR MEDICAL HEALTH INSURANCE CARRIERS REGULATED BY THE NEW MEXICO OFFICE OF THE SUPERINTENDENT

RE: MENTAL HEALTH AND SUBSTANCE USE DISORDER PARITY DATA CALL, CONFIDENTIALITY OF DATA SUBMISSIONS

UPDATE: The data submitted pursuant to the data call described in the bulletin will be deemed confidential pursuant to NMSA 1978, Sections 59A-2-12(B), 59A-18-13.2(G), 59A-23-30, 59A-46-69, and 59A-47-64.

The Mental Health Parity and Addiction Equity Act (MHPAEA), amended in November 2013, includes provisions that require group health plans and health insurance carriers to ensure Mental Health and Substance Use Disorder (MH/SUD) parity with Medical and Surgical (Med/Surg) services. This includes performing and documenting comparative analyses of network adequacy, pharmacy benefits, quantitative treatment limitations (QTLs) and nonquantitative treatment limitations (NQTLs). Group plans and health insurance carriers are further required to make these analyses available to applicable state authorities upon request.

Pursuant to NMSA 1978, Section 59A-4-3, and to ensure that all New Mexicans have access to care and coverage compliant with state and federal parity requirements, the New Mexico Office of Superintendent of Insurance (OSI) directs every subject health plan to submit data and comparative analyses, using the attached data call tools.

Group plans and health insurance carriers are required to report data and analyses regarding health care coverage for plan years beginning on or after January 1, 2023, and offered through December 31, 2023, i.e., Plan Year 2023.

SANTA FE LOCATION (MAIN OFFICE)
(OVERNIGHT/SECOND DAY MAIL
ONLY)

1120 Paseo De Peralta, 4th Floor
Santa Fe, New Mexico 87501

(USPS MAIL ONLY)
P O Box 1689
Santa Fe, New Mexico 87504

Timeline:

All reporting as described in this data call is due by 12:00 p.m. on Friday, November 29, 2024.

Lines of Business:

The reported data shall include information on major medical health coverage offered in New Mexico in the following major medical markets:

- Individual HMO (both on- and off-exchange)
- Small Group fully insured HMO and PPO
- Large Group fully insured HMO and PPO with highest enrollment (as applicable)

Null reporting is not required for carriers that do not offer major medical health insurance coverage.

Data to Report:

Provider network information, pharmacy benefits, QTL and NQTL analyses relating to network adequacy and utilization management protocols as outlined in the required data call templates.

Reporting Procedure:

The data to report must be submitted using the designated data call templates listed below:

1. Self-Attestation Tool
2. Data File Layouts

The templates are available for download on the OSI website, Mental Health Parity tab at: <https://www.osi.state.nm.us/pages/bureaus/mcb/resources/mental-health-parity>

The “Self-Attestation Tool” must be submitted through the SERFF online portal under the HOrg03 Health - Other TOI, Informational Filing Type.

The “Data File Layouts” document is a request for raw data which must be submitted through a secure drop-box. OSI will provide additional instructions to each individual carrier. Frequently Asked Questions (FAQs) are provided in a separate document titled “Additional Guidance-FAQs”, also on the OSI website, Mental Health Parity tab. OSI will provide updated FAQs as needed, based on questions received.

OSI will accept submissions at either the group or individual company level. If reporting by group, please include all companies in the group or ensure that no companies are duplicated within separate submissions. Individual companies, not part of a group, should provide their company code in the group code field on the template.

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Please submit questions to the OSI Mental Health Parity team at the following email address:

OSI.MentalHealthParity@osi.nm.gov

Failure to submit the information requested in the data call may result in the imposition of fines, rejection of qualified health plan certification, or revocation of license.

As always, OSI thanks carriers for their partnership and cooperation.

ISSUED this 24th day of February 2025.



ALICE T. KANE
Superintendent of Insurance

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