

APA Official Actions

Position Statement Supporting Implementation of the Mental Health Parity and Addiction Equity Act (MHPAEA or Parity Law)

Approved by the Board of Trustees, December 2024
Approved by the Assembly, November 2024

© Copyright 2024, American Psychiatric Association. All rights, including for text and data mining (TDM), Artificial Intelligence (AI) training, and similar technologies, are reserved.

“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects.” – *APA Operations Manual*

Issue:

The Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA or parity law) requires health plans that offer behavioral health coverage to ensure that financial requirements (such as deductibles, copayments, coinsurance, and out-of-pocket limits) and treatment limits (such as day and visit limits as well as nonquantitative limits on benefits such as prior authorization) on these benefits are no more restrictive than those on medical and surgical benefits. However, full implementation and enforcement of the parity law is incomplete. As a result, people seeking mental health/substance use disorder (MH/SUD) care often face discriminatory barriers, including higher costs, for that care.

APA Position:

- All people should have the ability to access high-quality and effective MH/SUD care without encountering illegal and discriminatory barriers to that care.
- There should be robust enforcement of all existing and new provisions regulating MHPAEA, including the use of monetary penalties.
- Parity protections extend to the Medicare program and its beneficiaries.
- Entities that provide administrative services, including third-party administrators, should be held accountable to parity laws.
- There should be robust enforcement of all existing and new parity laws and regulatory requirements for Medicaid programs.
- MH/SUD benefits should not be “carved out” and administered by third parties.

Author: Council on Health Care Systems and Financing

Collaborators: Council on Advocacy and Government Relations