NEW YORK STATE DEPARTMENT OF HEALTH
DIVISION OF HEALTH PLAN CONTRACTING AND OVERSIGHT
ARTICLES 44 AND 49 STATEMENT OF DEFICIENCIES

NAME OF MANAGED CARE ORGANIZATION	**TYPE OF SURVEY:**
UnitedHealthCare of New York, Inc.	Focus Survey: Mental Health Parity and Addiction Equity Act Testing of Phase III Workbooks
STREET ADDRESS, CITY, STATE, ZIP CODE	**SURVEY DATES:**
77 Water Street, 14th Floor New York, NY 10005	March 11, 2020 – November 30, 2020 Survey ID# 1949100952

NOTE: The following list of deficiencies was identified by Health Department representatives during an Article 44 and/or Article 49 operational or focused survey of your Managed Care Organization (MCO). Correction of these deficiencies is required in order to bring your MCO into compliance with Article 44 and/or 49 of the New York State Public Health Law and the New York State Official Compilation of Codes, Rules, and Regulations (10NYCRR). In the column headed Provider Plan of Correction, describe the Plan of Corrective Action and anticipated date of corrections. The Plan of Correction should be returned within 15 business days.

Deficiencies	Plan of Correction with Timetable
10 CRR-NY 98-1.16 Disclosure and filing. (h) In the event an MCO does not provide substantially complete reports or other information required under this Subpart by the due date, or provide requested information within 30 days of any written request for a specific analysis or report by the superintendent or commissioner, the superintendent or commissioner is authorized to levy a civil penalty after notice and hearing, pursuant to section 12 of the Public Health Law or sections 307 and 308 of the Insurance Law. **Deficiency**: Based on the review of UnitedHealthcare of New York, Inc's (UHC) Phase III nonquantitative treatment limitation (NQTL) workbook submissions, the MCO failed to provide all required information and comparative analyses demonstrating compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), P.L. 110-343 for 4 of 10 NQTLS examined; retrospective review, outlier review, experimental/investigational determinations and fail first. • Specifically, for retrospective review in the inpatient and outpatient benefit classifications, UHC failed to delineate factors in Step 2, factors triggering the NQTL. The MCO also failed to define Factors in Step 3 evidentiary standards.	**UnitedHealthcare of New York, Inc. (UHC) d/b/a UnitedHealthcare Community Plan** **(UHC) Response for "Retrospective Review"** **Review of Non-Compliance** 1. UHC will identify (Step 2) factors triggering the NQTL for inpatient and outpatient retrospective review by 01/31/2022. 2. UHC will identify evidentiary standards and comparability and equivalent stringency (Step 3) for Retrospective Review for Inpatient and Outpatient by 01/31/2022. 3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Retrospective Review for Inpatient and Outpatient by 01/31/2022. 4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Retrospective Review for Inpatient and Outpatient by 01/31/2022. 5. UHC will summarize its findings for Retrospective Review for Inpatient and Outpatient by 01/31/2022. 6. UHC notes the deficiencies found for retrospective review of Prescription Drugs. The Plan does not conduct retrospective review of Prescription Drugs and this documentation was submitted in error. The Plan respectfully requests that this insufficiency be reconsidered as the retrospective review NQTL does not apply to Prescription Drugs.

comparability and equivalent stringency, and provide substantive comparative analyses in Steps 3 through 5 for retrospective review and outlier review in the inpatient, outpatient, and prescription drugs benefit classifications. The MCO also failed to provide all required information and substantive comparative analyses in Steps 1 through 5 for retrospective review in the prescription drugs benefit classification.

UHC failed to provide all required information and substantive comparative analyses for experimental/investigational determinations in the prescription drugs benefit classification in Steps 2 through 5, as the response to Step 1, MCO Specific language of NQTL, was duplicated for the remaining steps. Additionally, UHC failed to Provide all required information and substantive comparative analyses for fail first in the Prescription drugs benefit classification in Steps 2 through 5.

Methods to Review and Remediate

1. UHC will update the NQTL Phase III workbook responses to: (1) evaluate and identify factors triggering the NQTL for Retrospective Review for both med/surg (M/S) and Mental Health/Substance Use Disorder (MH/SUD) benefits;(2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Retrospective Review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks – ***Status Completed***
4. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Inpatient and Outpatient retrospective review and demonstrate compliance with MHPAEA by 01/31/2022.

Education and Training

1. UHC will update the Mental Health Parity (MHP) training module by 05/03/2021 – ***Status Completed***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed***
    - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state mental health and substance use disorder (MH/SUD) parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed***
    - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
    - Repeat reminders sent to ensure completion
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing***
    - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed***
    - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of Plan of Correction (POC)

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022

Responsible Parties
Review of Non-Compliance

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- [redacted] Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training

- UHC Mental Health Parity Team

Monitoring Implementation of POC

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Outlier Review"
Review of Non-Compliance

1. UHC will define identify evidentiary standards comparability and equivalent stringency (Step 3) for Inpatient, Outpatient and Prescription Drugs by 01/31/2022.
2. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs by 01/31/2022.
3. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs outliers by 01/31/2022.
4. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate

1. UHC will then update the Phase III workbook responses to: (1) identify factors triggering the Outlier NQTL for inpatient and outpatient and prescription drugs for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Outlier Review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training:

1. UHC will update the MHP training module by 05/03/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
    - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed.***
    - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
    - Repeat reminders sent to ensure completion
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
    - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
    - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***

3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed – 01/31/2022

Responsible Parties
Review of Non-Compliance
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training
- UHC Mental Health Parity Team

Monitoring Implementation of POC
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Experimental and Investigational Determinations"
Review of Non-Compliance
1. UHC will identify (Step 2) factors triggering the NQTL Experimental and Investigational NQTL for Prescription Drug by 01/31/2022.
2. UHC will define the evidentiary standards comparability and equivalent stringency (Step 3) for Experimental and Investigational for Prescription Drug by 01/31/2022.
3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs by 01/31/2022.
4. UHC will document substantive comparative analyses for (Step 5) in-operation comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs by 01/31/2022.
5. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate

1. UHC will update the NQTL Phase III workbook responses to: (1) identify factors triggering the NQTL for Experimental and Investigational determinations of Prescription Drug for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Experimental and Investigational Determinations for Prescription Drugs for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to the policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training

1. UHC will update the MHP training module by 05/03/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
    - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed.***
    - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
    - Repeat reminders sent to ensure Completion.
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
    - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
    - Please note that new employees are added to the training requirement, which impacts the data and completion.

Monitoring Implementation of POC

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022

Responsible Parties

Review of Non-Compliance

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training

- UHC Mental Health Parity Team Monitoring Implementation of POC

Monitoring Implementation of POC

- [redacted] Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Fail First"

Review of Non-Compliance

1. UHC will define factors (Step 2) triggering the NQTL for Prescription Drugs - Fail First by 01/31/2022
2. UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for Prescription Drugs - Fail First by 01/31/2022.
3. UHC will provide substantive comparative analyses for (Step 4) as written comparability for Prescription Drugs – Fail First by 01/31/2022.
4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Prescription Drugs-Fail First by 01/31/2022
5. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for and Prescription Drugs – Fail First and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate

1. UHC will then update the Phase III workbook responses to: (1) identify factors triggering the NQTL for Prescription Drugs – Fail First for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Prescription Drugs – Fail First for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to the policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training

1. UHC will update the MHP training module by 05/06/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
   - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/21 – ***Status Completed.***
   - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
   - Repeat reminders sent to ensure completion.
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
   - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
   - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

	Monitoring Implementation of POC 1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.*** 2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.*** 3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022 **Responsible Parties** **Review of Non-Compliance** • [redacted] Director of Health Plan Operations • UHC Mental Health Parity Team • UHC Clinical, Operations and Pharmacy Subject Matter Experts • Optum Behavioral Health Subject Matter Experts **Methods to Review and Remediate** • [redacted], Director of Health Plan Operations • UHC Mental Health Parity Team • UHC Clinical, Operations and Pharmacy Subject Matter Experts • Optum Behavioral Health Subject Matter Experts **Education and Training** • UHC Mental Health Parity Team Monitoring Implementation of POC **Monitoring Implementation of POC** • [redacted], Director of Health Plan Operations • UHC Mental Health Parity Team Remediation Start Date: 05/26/2021 Remediation End Date: 01/31/2022 Overall Owner: [redacted] Director of Health Plan Operations

	UHC Overall Response **Review of Non-Compliance** The Statement of Deficiency (SOD) along with the Plan of Correction (POC) supplied apply to Medicaid Managed Care, Health and Recovery Plan (HARP), Child Health Plus, & Essential Plan. UHC will ensure an annual review and update, as necessary, to all sections within the MHPAEA Testing Phase III Workbooks. The review and update schedule will be adjusted as needed to account for any regulatory changes and OMH request. Responsible Parties • [redacted], Director of Health Plan Operations • UHC Mental Health Parity Team • UHC Clinical, Operations and Pharmacy Subject Matter Experts • Optum Behavioral Health Subject Matter Experts UHC plans to educate/train staff of any necessary changes to address potential noncompliance. Business SMEs will identify responsible staff to assign a required annual training course for Mental Health Parity through the company's Learning Management System (LMS). The LMS will allow responsible parties to monitor reports to ensure completion of the required training. Responsible Parties • [redacted], Director of Health Plan Operations • UHC Mental Health Parity Team • UHC Clinical, Operations and Pharmacy Subject Matter Experts • Optum Behavioral Health Subject Matter Experts

MCO Representative's Signature: [redacted]	Date: November 16, 2021
Title: CEO	

Statement of Findings
UnitedHealthcare of New York, Inc.
Mental Health Parity and Addiction Equity Act Testing of Phase III Workbooks
March 11, 2020 -- November 30, 2020
Survey ID#: 1949100952

Parity Compliance

10.2 Compliance with State Medicaid Plan, Applicable Laws and Regulations h.) Mental Health and Substance Use Disorder Benefits Parity Requirements
ii.) The Contractor shall comply with mental health and substance use disorder benefits parity requirements for financial requirements and treatment limitations specified in 42 CFR 438.910.

18.5 Reporting Requirements
a) The Contractor shall submit the following reports to SDOH (unless otherwise specified). The Contractor will certify the data submitted pursuant to this section as required by SDOH. The certification shall be in the manner and format established by SDOH and must attest, based on best knowledge, information, and belief to the accuracy, completeness and truthfulness of the data being submitted.
xxii) Mental Health and Substance Use Disorder Parity Reporting Requirements
Upon request by the SDOH, OMH or OASAS the Contractor shall prepare and submit documentation and reports, in a form and format specified by SDOH, OMH or OASAS, necessary for the SDOH, OMH or OASAS to establish and demonstrate compliance with 42 CFR 438 Subpart K, and applicable State statute, rules, and guidance.

35.1 Contractor and SDOH Compliance with Applicable Laws
Notwithstanding any inconsistent provisions in this Agreement, the Contractor and SDOH shall comply with all applicable requirements of the State Public Health Law; the State Social Services Law; the State Finance Law; the State Mental Hygiene Law; the State Insurance Law; Title XIX of the Social Security Act; Title VI of the Civil Rights Act of 1964 and 45 CFR Part 80, as amended; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973 and 45 CFR Part 84, as amended; the Age Discrimination Act of 1975 and 45 CFR Part 91, as amended; the ADA; Title XIII of the Federal Public Health Services Act, 42 U.S.C § 300e et seq., regulations promulgated thereunder; the Health Insurance Portability and Accountability Act of 1996 (P.L. 104-191) and related regulations; the Federal False Claims Act, 31 U.S.C. § 3729 et seq.; Mental Health Parity and Addiction Equity Act of 2008, (P.L. 110-345); for Contractors operating in New York City, the New York City Health Code; and all other applicable legal and regulatory requirements in effect at the time that this Agreement is signed and as adopted or amended during the term of this Agreement. The parties agree that this Agreement shall be interpreted according to the laws of the State of New York.

Finding:

Based on the review of UnitedHealthcare of New York, Inc.'s (UHC) Phase III nonquantitative treatment limitation (NQTL) workbook submissions, the Managed Care Organization (MCO) failed to provide all required information and comparative analyses demonstrating compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), P.L. 110-343, for 4 of 10 NQTLS examined; retrospective review, outlier review, experimental/investigational determinations, and fail first.

- Specifically, for retrospective review in the inpatient and outpatient benefit classifications, UHC failed to delineate factors in Step 2, factors triggering the NQTL The MCO also failed to define factors in Step 3, evidentiary standards comparability, and equivalent stringency, and provide substantive comparative analyses in Steps 3 through 5 for retrospective review and outlier review in the inpatient, outpatient, and prescription drugs benefit classifications. The MCO also failed to provide all required information and substantiative and comparative analyses in Steps 1 through 5 for retrospective review in the prescription drugs benefit classification.

  UHC failed to provide all required information and substantive comparative analyses for experimental/investigational determinations in the prescription drugs benefit classification in Steps 2 through 5, as the response to Step 1, MCO specific language of NQTL, was duplicated for the remaining steps. Additionally, UHC failed to provide all required information and substantive comparative analyses for fail first in the prescription drugs benefit classification in Steps 2 through 5.

UnitedHealthcare of New York, Inc. (UHC) d/b/a UnitedHealthcare Community Plan Response:

(UHC) Response for "Retrospective Review"
Review of Non-Compliance

1. UHC will identify (Step 2) factors triggering the NQTL for inpatient and outpatient retrospective review by 01/31/2022.
2. UHC will identify evidentiary standards and comparability and equivalent stringency (Step 3) for Retrospective Review for Inpatient and Outpatient by 01/31/2022.
3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Retrospective Review for Inpatient and Outpatient by 01/31/2022.
4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Retrospective Review for Inpatient and Outpatient by 01/31/2022.
5. UHC will summarize its findings for Retrospective Review for Inpatient and Outpatient by 01/31/2022.
6. UHC notes the deficiencies found for retrospective review of Prescription Drugs. The Plan does not conduct retrospective review of Prescription Drugs and this documentation was submitted in error. The Plan respectfully requests that this insufficiency be reconsidered as the retrospective review NQTL does not apply to Prescription Drugs.

Methods to Review and Remediate

1. UHC will update the NQTL Phase III workbook responses to: (1) evaluate and identify factors triggering the NQTL for Retrospective Review for both med/surg (M/S) and Mental Health/Substance Use Disorder (MH/SUD) benefits;(2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Retrospective Review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks – ***Status Completed***
4. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Inpatient and Outpatient retrospective review and demonstrate compliance with MHPAEA by 01/31/2022.

Education and Training

1. UHC will update the Mental Health Parity (MHP) training module by 05/03/2021 – ***Status Completed***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed***
    - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state mental health and substance use disorder (MH/SUD) parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed***
    - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
    - Repeat reminders sent to ensure completion
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing***
    - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed***
    - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of Plan of Correction (POC)

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022

Responsible Parties
Review of Non-Compliance
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training
- UHC Mental Health Parity Team

Monitoring Implementation of POC
- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Outlier Review"
Review of Non-Compliance
1. UHC will define identify evidentiary standards comparability and equivalent stringency (Step 3) for Inpatient, Outpatient and Prescription Drugs by 01/31/2022.
2. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs by 01/31/2022.
3. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs outliers by 01/31/2022.
4. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Inpatient, Outpatient and Prescription Drugs and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate
1. UHC will then update the Phase III workbook responses to: (1) identify factors triggering the Outlier NQTL for inpatient and outpatient and prescription drugs for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Outlier Review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training:

1. UHC will update the MHP training module by 05/03/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
   - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed.***
   - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
   - Repeat reminders sent to ensure completion
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
   - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
   - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed – 01/31/2022

Responsible Parties

Review of Non-Compliance

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training

- UHC Mental Health Parity Team

Monitoring Implementation of POC

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Experimental and Investigational Determinations"

Review of Non-Compliance

1. UHC will identify (Step 2) factors triggering the NQTL Experimental and Investigational NQTL for Prescription Drug by 01/31/2022.
2. UHC will define the evidentiary standards comparability and equivalent stringency (Step 3) for Experimental and Investigational for Prescription Drug by 01/31/2022.
3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs by 01/31/2022.
4. UHC will document substantive comparative analyses for (Step 5) in-operation comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs by 01/31/2022.
5. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for Experimental and Investigational Determinations of Prescription Drugs and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate

1. UHC will update the NQTL Phase III workbook responses to: (1) identify factors triggering the NQTL for Experimental and Investigational determinations of Prescription Drug for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Experimental and Investigational Determinations for Prescription Drugs for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to the policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training

1. UHC will update the MHP training module by 05/03/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
    - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/2021 – ***Status Completed.***
    - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
    - Repeat reminders sent to ensure Completion.
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
    - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
    - Please note that new employees are added to the training requirement, which impacts the data and completion.

Monitoring Implementation of POC

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022

Responsible Parties

Review of Non-Compliance

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training

- UHC Mental Health Parity Team Monitoring Implementation of POC

Monitoring Implementation of POC

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Response for "Fail First"

Review of Non-Compliance

1. UHC will define factors (Step 2) triggering the NQTL for Prescription Drugs - Fail First by 01/31/2022
2. UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for Prescription Drugs - Fail First by 01/31/2022.
3. UHC will provide substantive comparative analyses for (Step 4) as written comparability for Prescription Drugs – Fail First by 01/31/2022.
4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for Prescription Drugs-Fail First by 01/31/2022
5. UHC will document in Step 6 a summary of Steps 1-5 especially with regards to Step 3 evidentiary standards comparability and equivalent stringency for and Prescription Drugs – Fail First and demonstrate compliance with MHPAEA by 01/31/2022.

Methods to Review and Remediate

1. UHC will then update the Phase III workbook responses to: (1) identify factors triggering the NQTL for Prescription Drugs – Fail First for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of Prescription Drugs – Fail First for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 01/31/2022.
2. UHC will develop a plan to remediate any findings where MH/SUD appears to be more stringent by 01/31/2022.
3. UHC will adhere to the policy developed (Phase I and Phase II POC 08/01/2021) to ensure an annual review, at minimum but as needed, of MHP Workbooks. ***Status Completed***

Education and Training

1. UHC will update the MHP training module by 05/06/2021 – ***Status Completed.***
2. UHC will identify applicable staff to train by 05/03/2021 – ***Status Completed.***
   - Training is provided to all active employees, directors or other governing body members, agents and other representatives engaged in functions that are subject to federal or state MH/SUD parity requirements or involved in MHP analysis as a part of the compliance program.
3. UHC will notify impacted active employees of the training by 05/07/21 – ***Status Completed.***
   - 05/06/2021 UHC; 05/05/2021 Optum Behavioral Health (OBH)
   - Repeat reminders sent to ensure completion.
4. UHC MHP team will monitor active employee training completion – ***Status Ongoing.***
   - Training completion rates are monitored weekly and associated reports are used to generate reminder emails and follow up with employees who have not yet completed the course.
5. UHC's goal for 100% training completion is 06/30/2021 – ***Status Completed.***
   - Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

1. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – 05/10/2021 – ***Status Completed.***
2. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – 06/18/2021 – ***Status Completed.***
3. UHC will review the policy and job aid in context to the deficiencies noted regarding Phase III and UHC will update these documents as needed - 01/31/2022

Responsible Parties

Review of Non-Compliance

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

Education and Training

- UHC Mental Health Parity Team Monitoring Implementation of POC

Monitoring Implementation of POC

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team

Remediation Start Date: 05/26/2021
Remediation End Date: 01/31/2022
Overall Owner: [redacted], Director of Health Plan Operations

UHC Overall Response
Review of Non-Compliance

The Statement of Deficiency (SOD) along with the Plan of Correction (POC) supplied apply to Medicaid Managed Care, Health and Recovery Plan (HARP), Child Health Plus, & Essential Plan.

UHC will ensure an annual review and update, as necessary, to all sections within the MHPAEA Testing Phase III Workbooks. The review and update schedule will be adjusted as needed to account for any regulatory changes and OMH request.

Responsible Parties

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts

UHC plans to educate/train staff of any necessary changes to address potential noncompliance. Business SMEs will identify responsible staff to assign a required annual training course for Mental Health Parity through the company's Learning Management System (LMS). The LMS will allow responsible parties to monitor reports to ensure completion of the required training.

Responsible Parties

- [redacted], Director of Health Plan Operations
- UHC Mental Health Parity Team
- UHC Clinical, Operations and Pharmacy Subject Matter Experts
- Optum Behavioral Health Subject Matter Experts