

**NEW YORK STATE DEPARTMENT OF HEALTH DIVISION OF
HEALTH PLAN CONTRACTING AND OVERSIGHT MHPAEA
TESTING PHASE I AND PHASE II WORKBOOKS**

NAME OF MANAGED CARE ORGANIZATION UnitedHealthcare of New York, Inc.	TYPE OF SURVEY: Focus Survey: MHPAEA Testing Phase I and Phase II Workbooks
STREET ADDRESS, CITY, STATE, ZIP CODE 77 Water Street, 14th Floor New York, NY 10005	SURVEY DATES: August 22, 2018 – September 8, 2020

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

Deficiencies	Plan of Correction with Timetable
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<p>Deficiency: Based on the review of UnitedHealthcare of New York, Inc.'s (UHC) Phase I and Phase II 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, (P.L. 110-345; MHPAEA) for 6 of 9 NQTLs examined; prior authorization, concurrent review, medical necessity criteria, formulary design, coding edits and reimbursement.</p> <p>Specifically, in Phase I, UHC failed to define factors in (Step 3) evidentiary standards comparability and equivalent stringency (outpatient and prescription drugs only) and provide substantive comparative analyses for (Step 4) as written comparability and equivalent stringency and (Step 5) in operation comparability and equivalent stringency (inpatient and outpatient only) for inpatient, outpatient, and prescription drug prior authorization.</p>	<p>UnitedHealthcare of New York, Inc. (UHC) Response for Prior Authorization: Review of Non-Compliance</p> <ol style="list-style-type: none"> UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for outpatient and prescription drugs by 07/15/2021 UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for inpatient, outpatient, and prescription drug prior authorization by 07/15/2021 UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for inpatient, outpatient, and prescription drug prior authorization by 07/15/2021 <p>Methods to Review and Remediate</p> <ol style="list-style-type: none"> UHC will update the NQTL workbook responses to: (1) identify factors triggering the NQTL for inpatient and outpatient prior authorization 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 concurrent review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 7/15/2021.

- 5. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
- 6. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

- 7. Training:
 - a. UHC will update the Mental Health Parity (MHP) training module by 05/03/21 – **Status Completed**
 - b. UHC will identify applicable staff to train by 05/03/21 – **Status Completed**
 - i. 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.
 - c. UHC will notify impacted active employees of the training by 05/07/21 – **Status Completed**
 - i. 05/06/21 UHC; 05/05/21 Optum Behavioral Health (OBH) (Training Announcement Included)
 - ii. Repeat reminders sent to ensure completion
 - d. UHC MHP team will monitor active employee training completion – **Status Completed.**
 - i. 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

e. UHC's goal for 100% training completion is 6/30/2021. – **Status Completed**

i. 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)

- 8. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – **Status Completed 5/10/2021**
- 9. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – **Status Completed 6/18/2021**

Responsible Parties

Review of Non-Compliance

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Education and Training

- 1. UHC Mental Health Parity Team

Monitoring Implementation of POC

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team

Remediation Start Date: 5/26/2021

Remediation End Date: 8/1/2021

Overall Owner: Sanrose Russell, Associate Director UHC Community Plan - NY

For inpatient and outpatient concurrent review, UHC failed to identify (Step 2) factors triggering the NQTL, define factors in (Step 3) evidentiary standards comparability and equivalent stringency, and provide substantive comparative analyses for (Step 4) as written comparability and equivalent stringency and (Step 5) in operation comparability and equivalent stringency.

**UHC Response for Concurrent Review:
Review of Non-Compliance**

1. UHC will identify (Step 2) factors triggering the NQTL for inpatient and outpatient concurrent review by 07/15/2021.
2. UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for inpatient and outpatient concurrent review by 07/15/2021.
3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for inpatient and outpatient concurrent review by 07/15/2021.
4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for inpatient and outpatient concurrent review by 07/15/2021.

Methods to Review and Remediate

5. UHC will then update the workbook responses to: (1) identify factors triggering the NQTL for inpatient and outpatient concurrent review for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of concurrent review for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 07/15/2021.
6. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
7. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

8. Training:
 - a. UHC will update the MHP training module by 05/03/21 – *Status Completed*

	<ul style="list-style-type: none"> b. UHC will identify applicable staff to train by 05/03/21 – <i>Status Completed</i> <ul style="list-style-type: none"> i. 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. c. UHC will notify impacted active employees of the training by 05/07/21 – <i>Status Completed</i> <ul style="list-style-type: none"> i. 05/06/21 UHC; 05/05/21 OBH (Training Announcement Included) ii. Repeat reminders sent to ensure completion d. UHC MHP team will monitor active employee training completion – <i>Status Completed.</i> <ul style="list-style-type: none"> i. 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 e. UHC’s goal for 100% training completion is 6/30/2021. – <i>Status Completed</i> <ul style="list-style-type: none"> i. Please note that new employees are added to the training requirement, which impacts the data and completion rate. <p>Monitoring Implementation of POC</p> <ul style="list-style-type: none"> 9. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – <i>Status Completed 5/10/2021</i> 10. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – <i>Status Completed 6/18/2021</i>
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<p>Additionally, the MCO failed to provide all required information and substantive comparative analyses for (Step 4) as written comparability and equivalent stringency comparability and equivalent stringency and (Step 5) in operation (inpatient and outpatient only) for inpatient, outpatient, and prescription drug medical necessity criteria.</p>	<p>Responsible Parties</p> <p>Review of Non-Compliance</p> <ol style="list-style-type: none"> 1. Sanrose Russell, Associate Director UHC Community Plan - NY 2. UHC Mental Health Parity Team 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts 4. Optum Behavioral Health Subject Matter Experts <p>Methods to Review and Remediate</p> <ol style="list-style-type: none"> 1. Sanrose Russell, Associate Director UHC Community Plan - NY 2. UHC Mental Health Parity Team 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts 4. Optum Behavioral Health Subject Matter Experts <p>Education and Training</p> <ol style="list-style-type: none"> 1. UHC Mental Health Parity Team <p>Monitoring Implementation of POC</p> <ol style="list-style-type: none"> 1. Sanrose Russell, Associate Director UHC Community Plan - NY 2. UHC Mental Health Parity Team <p>Remediation Start Date: 5/26/2021 Remediation End Date: 8/1/2021</p> <p>Overall Owner: Sanrose Russell, Associate Director UHC Community Plan - NY</p> <p>UHC Response for Medical Necessity:</p> <p>Review of Non-Compliance</p> <ol style="list-style-type: none"> 1. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for inpatient, outpatient, and prescription drug medical necessity criteria by 07/15/2021 2. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for inpatient, outpatient, and prescription drug medical necessity by 07/15/2021

Methods to Review and Remediate

- 3. UHC will update the NQTL workbook responses to: (1) identify factors triggering the NQTL for inpatient, outpatient and prescription drug medical necessity review for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of medical necessity for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 7/15/2021.
- 4. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
- 5. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

- 6. Training:
 - a. UHC will update the MHP training module by 05/03/21 – *Status Completed*
 - b. UHC will identify applicable staff to train by 05/03/21 – *Status Completed*
 - i. 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.
 - c. UHC will notify impacted active employees of the training by 05/07/21 – *Status Completed*
 - i. 05/06/21 UHC; 05/05/21 OBH (Training Announcement Included)
 - ii. Repeat reminders sent to ensure completion

- d. UHC MHP team will monitor active employee training completion – ***Status Completed.***
 - i. 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
- e. UHC’s goal for 100% training completion is 6/30/2021. – ***Status Completed***
 - i. Please note that new employees are added to the training requirement, which impacts the data and completion

Monitoring Implementation of POC

- 7. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – ***Status Completed 5/10/2021***
- 8. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – ***Status Completed 6/18/2021***

Responsible Parties

Review of Non-Compliance

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- 1. HP SME
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Education and Training

- 1. UHC Mental Health Parity Team

Monitoring Implementation of POC

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team

For prescription drug formulary design, UHC failed to identify all (Step 2) factors triggering the NQTL, define all factors in (Step 3) evidentiary standards comparability and equivalent stringency, and provide substantive comparative analyses for (Step 3) evidentiary standards, (Step 4) as written comparability and equivalent stringency and (Step 5) in operation comparability and equivalent stringency.

Remediation Start Date: 5/26/2021

Remediation End Date: 8/1/2021

Overall Owner: Sanrose Russell, Associate Director
UHC Community Plan - NY

UHC Response for Prescription Drug Formulary:

Review of Non-Compliance

1. UHC will identify (Step 2) factors triggering the NQTL for prescription drug formulary by 07/15/2021.
2. UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for prescription drug formulary by 07/15/2021.
3. UHC will provide substantive comparative analyses for (Step 4) as written comparability for prescription drug formulary by 07/15/2021.
4. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for prescription drug formulary by 07/15/2021.

Methods to Review and Remediate

5. UHC will then update the workbook responses to: (1) identify factors triggering the NQTL for prescription drug formulary for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of prescription drug formulary for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 07/15/2021.
6. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
7. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

8. Training:

- a. UHC will update the MHP training module by 05/03/21 – *Status Completed*
- b. UHC will identify applicable staff to train by 05/03/21 – *Status Completed*
 - i. 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.
- c. UHC will notify impacted active employees of the training by 05/07/21 – *Status Completed*
 - i. 05/06/21 UHC; 05/05/21 OBH (Training Announcement Included)
 - ii. Repeat reminders sent to ensure completion
- d. UHC MHP team will monitor active employee training completion – *Status Completed.*
 - i. 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
- e. UHC’s goal for 100% training completion is 6/30/2021. – *Status Completed*
 - i. Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

- 9. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – *Status Completed 5/10/2021*

10. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – *Status Completed 6/18/2021*

Responsible Parties

Review of Non-Compliance

1. Sanrose Russell, Associate Director
UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy
Subject Matter Experts
4. Optum Behavioral Health Subject Matter
Experts

Methods to Review and Remediate

1. Sanrose Russell, Associate Director
UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy
Subject Matter Experts
4. Optum Behavioral Health Subject Matter
Experts

Education and Training

1. UHC Mental Health Parity Team

Monitoring Implementation of POC

1. Sanrose Russell, Associate Director
UHC Community Plan - NY
2. UHC Mental Health Parity Team

Remediation Start Date: 5/26/2021

Remediation End Date: 8/1/2021

Overall Owner: Sanrose Russell, Associate Director
UHC Community Plan - NY

UHC Response for Coding Edits:

Review of Non-Compliance

1. UHC will identify (Step 2) factors triggering the NQTL for Coding Edits by 07/15/2021.
2. UHC will define factors in (Step 3) evidentiary standards comparability and equivalent stringency for Coding Edits by 07/15/2021.
3. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for coding edits by 07/15/2021

Specifically, in Phase II, UHC failed to provide all information and substantive comparative analyses that were responsive to the NQTL and each step for (Step 2) factors triggering the NQTL, (Step 3) evidentiary standards comparability and equivalent stringency, (Step 4) as written comparability and equivalent stringency, and (Step 5) in operation comparability and equivalent stringency for inpatient and outpatient coding edits.

4. UHC Will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for coding edits by 07/15/2021.

Methods to Review and Remediate

5. UHC will then update the workbook responses to: (1) identify factors triggering the NQTL for coding edits for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of coding edits for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 7/15/2021.
6. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
7. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

8. Training:
 - a. UHC will update the MHP training module by 05/03/21 – *Status Completed*
 - b. UHC will identify applicable staff to train by 05/03/21 – *Status Completed*
 - i. 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.
 - c. UHC will notify impacted active employees of the training by 05/07/21 – *Status Completed*
 - i. 05/06/21 UHC; 05/05/21 OBH (Training Announcement Included)
 - ii. Repeat reminders sent to ensure completion

- d. UHC MHP team will monitor active employee training completion – **Status Completed.**
 - i. 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
- e. UHC’s goal for 100% training completion is 6/30/2021. – **Status Completed**
 - i. Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

- 9. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – **Status Completed 5/10/2021**
- 10. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – **Status Completed 6/18/2021**

Responsible Parties

Review of Non-Compliance

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team
- 3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
- 4. Optum Behavioral Health Subject Matter Experts

Education and Training

- 1. UHC Mental Health Parity Team

Monitoring Implementation of POC

- 1. Sanrose Russell, Associate Director UHC Community Plan - NY
- 2. UHC Mental Health Parity Team

Additionally, the MCO failed to provide all information and complete substantive comparative analyses for (Step 4) as written comparability and equivalent stringency and (Step 5) in operation comparability and equivalent stringency due to an added factor that was not previously identified for inpatient, outpatient, and emergency care reimbursement.

Remediation Start Date: 5/26/2021

Remediation End Date: 8/1/2021

Overall Owner: Sanrose Russell, Associate Director
UHC Community Plan - NY

UHC Response for Reimbursement:

Review of Non-Compliance

1. UHC will document substantive comparative analyses for (Step 4) as written comparability and equivalent stringency for inpatient, outpatient, and emergency care reimbursement by 07/15/2021
2. UHC will document substantive comparative analyses for (Step 5) in operation comparability and equivalent stringency for inpatient, outpatient, and emergency care reimbursement by 07/15/2021

Methods to Review and Remediate

3. UHC will update the NQTL workbook responses to: (1) identify factors triggering the NQTL for inpatient, outpatient, and emergency care reimbursement for both M/S and MH/SUD benefits; (2) provide comparative analysis to demonstrate comparable factors are used to determine applicability of reimbursement for the identified MH/SUD benefits as were used for M/S benefits, including the sources for ascertaining each of these factors by 07/15/2021.
4. UHC will remediate any findings where MH/SUD appears to be more stringent by 08/01/2021.
5. UHC will develop a policy to ensure an annual review, at minimum but as needed, of MHP Workbooks by 8/01/2021.

Education and Training

6. Training:
 - a. UHC will update the MHP training module by 05/03/21 – *Status Completed*

- b. UHC will identify applicable staff to train by 05/03/21 – **Status Completed**
 - i. 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.
- c. UHC will notify impacted active employees of the training by 05/07/21 – **Status Completed**
 - i. 05/06/21 UHC; 05/05/21 OBH (Training Announcement Included)
 - ii. Repeat reminders sent to ensure completion
- d. UHC MHP team will monitor active employee training completion – **Status Completed.**
 - i. 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
- e. UHC’s goal for 100% training completion is 6/30/2021. – **Status Completed**
 - i. Please note that new employees are added to the training requirement, which impacts the data and completion rate.

Monitoring Implementation of POC

- 7. UHC will establish a policy outlining MHP Team Quality and Compliance Monitoring – **Status Completed 5/10/2021**
- 8. UHC will create a job aid for the MHP Team detailing Quality and Compliance Monitoring – **Status Completed 6/18/2021**

Responsible Parties

Review of Non-Compliance

1. Sanrose Russell, Associate Director UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
4. Optum Behavioral Health Subject Matter Experts

Methods to Review and Remediate

1. Sanrose Russell, Associate Director UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
4. Optum Behavioral Health Subject Matter Experts

Education and Training

1. UHC Mental Health Parity Team

Monitoring Implementation of POC

1. Sanrose Russell, Associate Director UHC Community Plan - NY
2. UHC Mental Health Parity Team

Remediation Start Date: 5/26/2021

Remediation End Date: 8/1/2021

Overall Owner: Sanrose Russell, Associate Director UHC Community Plan - NY

In order to ensure UHC meets the requirements of an acceptable plan of correction (POC) related to the focus survey *MHPAEA Testing Phase I and Phase II Workbooks*, please provide the following:

Line(s) of business to which the POC applies

Written commitment that Phase I and Phase II workbooks will be updated and maintained (we may request to review Phase I and Phase II workbooks at any time).

A plan to educate/train staff of any necessary changes to address all potential noncompliance

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 I and Phase II Workbooks. Review and update schedule will be adjusted as needed to account for any regulatory changes and OMH request.

Responsible Parties

1. Sanrose Russell, Associate Director UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
4. 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

1. Sanrose Russell, Associate Director UHC Community Plan - NY
2. UHC Mental Health Parity Team
3. UHC Clinical, Operations and Pharmacy Subject Matter Experts
4. Optum Behavioral Health Subject Matter Experts



Date: 8/2/2021

Title: CEO