

What To Do If Your Insurer Won't Pay for Treatment

- Use your plan's appeal process. If you have questions about the process, call the health plan. Be sure to keep a record of the day you call, the name and title of the person you speak with, and a summary of your conversation.
 - If you decide to appeal in writing, be sure to
 - 1) Document the facts that support your case.
 - 2) Keep your letter businesslike.
 - 3) Clearly state why you believe you are correct.
 - 4) Include any supporting documents from your psychiatrist.
 - 5) Save a copy of your letter(s).
 - Make sure you know and meet all appeal deadlines.
 - If your appeal is denied, find out if you can appeal again (many companies have three or four levels of appeal). Ask your psychiatrist to appeal on your behalf.
 - Keep a record of all conversations with your psychiatrist, mental health clinician, and employees of the managed care company about the matter. Include dates, names, titles, phone numbers, and summaries of each conversation.
 - Contact your state's external review program – most states have one (call your state insurance commissioner).
 - If all appeals fail, consider talking about your rights with an attorney, your employee benefits manager, your union representative, or your congressman. You may also wish to contact a professional organization devoted to the needs of the mentally ill, such as the National Alliance for the Mentally Ill in Arlington, Virginia, or the National Mental Health Association in Alexandria, Virginia.
- NOTE:** If you are denied treatment in a life-threatening situation, request an "expedited appeal" from the managed care company over the telephone or go outside the system and get help immediately!

What If Your Health Plan Changes

- Check your new health plan carefully to see if your mental health benefits are still the same. They often are not. Find out if your current psychiatrist is listed in the new plan's network of physicians.
- If your current psychiatrist is not listed, see if your new health plan will allow you to continue seeing him or her. If not, ask your current psychiatrist to recommend a psychiatrist from the new plan's network.
- Be sure to obtain authorization from your new health plan before seeing any psychiatrist.

Ask Your Psychiatrist About

- All treatments that could be helpful to you, even those not covered by your mental health plan.
- Any financial arrangements your treating clinicians may have that could have an impact on your treatment plan.

Ask questions and know your rights.

What You Should Know About...

YOUR MENTAL HEALTH BENEFITS UNDER MANAGED CARE

- Checklist to Evaluate your Mental Health Benefits
- What To Do if Your Insurer Won't Pay for Treatment
- What If Your Health Plan Changes
- Ask Your Psychiatrist About

YOUR MENTAL HEALTH BENEFITS

In any year, one in five Americans will suffer from a mental illness, which includes substance use disorders. *The vast majority of people who have a mental illness will improve or recover if they get the right treatment.* In today's world of managed care, it is important to know what your mental health plan covers and what you can do if your plan doesn't cover your treatment costs. This pamphlet is written specifically for those who are covered by an employer's health plan.

Learn All You Can About Your Plan

Take the time to read the section on mental health benefits in your insurance plan. This includes all the pieces of paper referred to in your enrollment form, member handbooks, newsletters, and directories. If you do not understand something in the plan, ask your human resources department (usually the employee benefits manager) or call your insurer directly.

If you are dissatisfied with any aspect of your plan's benefits, talk to your employee benefits manager or your union representative to try to improve your mental health benefits.

Evaluate Your Benefits

Here is a checklist for you to use to evaluate your mental health benefits coverage. In the ideal mental health plan, **all** of your answers to the following checklist would be **YES**

- | YES | NO |
|---|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
| Are your deductibles, copay amounts, annual limits, and lifetime maximums the same for psychiatric disorders as they are for other illnesses, such as diabetes or cancer? If not (and you are insured through your employer's health plan) see your employee benefits manager about getting equal coverage. | |
| <input type="checkbox"/> | <input type="checkbox"/> |
| Does your plan cover psychiatric emergencies and will it pay for you to go to the nearest emergency facility? | |
| <input type="checkbox"/> | <input type="checkbox"/> |
| Does your plan cover any illnesses you suffered in the past? Many plans require a waiting period for preexisting illnesses. | |
| <input type="checkbox"/> | <input type="checkbox"/> |
| Does your plan allow you to see a psychiatrist immediately without seeing a family physician or plan service representative first? If you have trouble getting to see a psychiatrist, contact your employee benefits manager or call your insurance plan. | |
| <input type="checkbox"/> | <input type="checkbox"/> |
| Are the brand-name medications you are taking covered? If not, you can appeal. Medications are usually handled by a separate company (called a pharmacy benefit manager) that is a part of your insurance plan. | |

YES NO

Does your plan allow you to choose any psychiatrist you want – even one outside of your health plan's network? (If you go outside the network, you may be required to pay a larger portion of the cost yourself.)

Does your plan allow you to have as many psychotherapy visits you and your psychiatrist believe are necessary? Even though your plan may reimburse you for, say, 20 psychotherapy sessions a year, managed care companies may decide treatment sessions are not "medically necessary" and not reimburse you for them.

NOTE: If your treatment includes both medication and psychotherapy, your treatment may include seeing a psychiatrist and another clinician such as a social worker. For example, the psychiatrist would make the diagnosis and prescribe and monitor your medications; the social worker would see you for psychotherapy or talk therapy. Because psychiatrists are medical doctors who can prescribe medications and are also psychotherapists, they can see you for both your medication visits and psychotherapy sessions. You can request that this be done.