

## **FAQs about Maricopa's Behavioral Health Program**

The following are frequently asked questions about the new EAP/Behavioral Health benefit for Maricopa County employees and their dependents.

### **What is a Behavioral Health Program?**

A behavioral health program provides mental health and substance abuse services. These services can be in either an:

- Office-based or outpatient setting
- Hospital-based inpatient care setting

Maricopa County's behavioral health program is being provided by Magellan Health Services, the leader in providing managed behavioral health care services and employee assistance programs.

### **Who is Eligible for Behavioral Health Services?**

The behavioral health benefit is provided to you and your eligible dependents who are enrolled in a CIGNA medical plan (except for CIGNA Choice Fund Health Savings Account). However, if you have waived your medical coverage, you are not eligible for behavioral health and substance abuse services. It provides services that support your well being. These services help you deal with a wide range of issues, including:

- Depression
- Severe stress and anxiety
- Alcohol or drug dependency
- Eating disorders
- Grief and loss
- Anger management
- Compulsive gambling
- And more

Through these services you can receive confidential counseling whenever you and/or your eligible dependents are faced with a personal challenge. Protecting your confidentiality is Magellan's top priority. All records, including personal information, referrals and evaluations, are kept confidential in accordance with federal and state laws.

### **How do I Access Behavioral Health Services?**

Accessing services is easy! By calling **1-888-213-5125**, you and your covered dependents have access to a wide range of quality, affordable behavioral health and substance abuse treatment services. Services in Magellan's network typically include:

- Outpatient assessment and treatment
- Alternative care such as partial hospitalization, intensive outpatient and day treatment programs
- Inpatient assessment and treatment
- Individual and group treatment
- Crisis intervention
- Treatment follow-up and aftercare

### **What is a Provider Network?**

Providers who have agreed to provide services for Magellan are in our Network. You must use providers in our network in order to get the maximum benefit, but you can pick the provider you want from our network. Except in emergency situations, you must use provider in our network. Your benefits include an out-of-network option which allows you to receive services from providers who are not contracted with Magellan. These services will be covered at the out-of-network benefit level.

Magellan's behavioral health and substance abuse network includes:

- Psychiatrists
- Psychologists
- Certified substance abuse counselors
- Licensed independent social workers
- Professional clinical counselors.

The network also includes hospitals, community mental health centers and other treatment centers. Because Magellan's network is so extensive, the care you need is never far away.

### **How can I find out if my provider is in the Magellan Network?**

You can call **1-888-213-5125** or log onto <http://www.MagellanHealth.com> to do a provider search.

### **What if my Provider isn't in the Magellan Network?**

You can ask your provider to join the Magellan network. Have your provider call **1-888-213-5125** for information on joining the Magellan Network. If your provider isn't in our network, you may still use that provider but you may pay more out of pocket costs or may pay the full amount that the provider charges. Before you continue to see an out of network provider, it is best to call Magellan at **1-888-213-5125** to see what your costs may be.

### **Important Guidelines about Your Behavioral Health Program**

Below are some important guidelines to keep in mind when using Magellan's services:

- To ensure that you receive the highest benefit coverage, make sure you call Magellan before seeking behavioral healthcare services.
- It is important for you to understand that in-network benefits received through a participating provider are payable only if each service is determined to be medically necessary and is approved by Magellan before you start treatment. Contact Magellan at 1-888-213-5125 for prior approval.
- Higher levels of care (such as inpatient, residential, intensive outpatient, and partial hospitalization) require prior approval by Magellan Health Services.
- Outpatient services with a non-contracted provider (not in the Magellan network) do not require prior approval. The Plan pays \$25 per visit for non-contracted provider. All other costs after plan payment of \$25 per visit are member's responsibility.
- Magellan recognizes there may be times when you feel that emergency care is needed for a life-threatening circumstance. In these situations, we request notification from you or the provider as soon as possible.

### **Who Can I Call if I have More Questions?**

Please do not hesitate to contact Magellan at **1-888-213-5125** if you have any questions about your behavioral health and substance abuse benefits.