## **Qualified Health Plans and Behavioral Health Services**

## Can I access mental health and substance use disorder services with the coverage through Qualified Health Plans?

If you receive health insurance coverage through <u>Qualified Health Plans</u> (QHPs), also known as private health insurance, from the New York State of Health, you should be able to access mental health and substance use disorder services through your coverage. You should know that Qualified Health Plans is another name for private health insurance.

You can contact your health plan or its Member Services division to learn more about your coverage for these services. If you need a list of the health plans that provide QHP coverage in in New York, you can consult the New York State of Health Qualified Health Plan List for 2022. A list of plans that have participated in the in New York during 2020 and 2021 is also available through the New York State of Health.

New York State and federal laws require most comprehensive health insurance plans to cover medically necessary mental health services and manage your mental health or substance use benefits as they manage medical and surgical benefits, without additional limitations. This is called "mental health parity" and requires that rules about copayments, number of visits and pre-authorizations should be similar for accessing mental health and substance use disorder services as they are for physical medical care. The <a href="NYS Office of Mental Health">NYS Office of Mental Health</a> provides more information on mental health parity for New Yorkers.

# What type of mental health and substance use disorder services can I get with my coverage through Qualified Health Plans?

QHPs are organized by <u>metal tiers</u>—platinum, gold, silver and bronze. The tiers correspond with the level of costs for premiums for each tier as well as out of pocket expenses, such as <u>co-pays</u>, <u>co-insurance and deductibles</u>. The higher the metal tier, the more you will pay for premiums and there will be limited out-of-pocket expenses and the lower the metal tier, you will pay less for monthly premiums, but more for out of pocket expenses. While all Qualified Health Plans will provide mental health and substance use disorder services as an essential benefit, there will likely be variation in your <u>costs</u> for your particular plan based upon the metal tier that you choose for your health coverage.

Your managed care plan should provide you with a Summary of Benefits and Coverage (SBC) in clear and accessible language that describes what is covered under your specific health plan. An example of the <u>SBC</u> is available on <u>healthcare.gov</u>. The SBC will show you the costs and services associated with your health plan, including information about mental health and substance use disorder services in a section titled "Types of Medical Events". You can learn more about the SBC on healthcare.gov.

If you do not have your SBC, you can request it from your health plan using the phone number provided on the back of your health insurance card.

QHPs must also cover prevention services that can help people address behavioral health issues, such as alcohol misuse screening and counseling or depression screening, which can support health and wellbeing. You can learn more about the preventive services must be covered by QHPs at <a href="healthcare.gov">healthcare.gov</a>.

# Will I need a referral or prior authorization to get mental health and substance use disorder services through Qualified Health Plans?

Depending on your particular health plan, you may need to get prior authorization or a referral from your primary care doctor before you can receive the mental health or substance use disorder services you might need. You should check your SBC or contact your health plan to confirm whether a referral or prior authorization is required.

If you don't need a referral from your primary care provider, you can use the NYC Well website to find a mental health professional. Visit NYC Well or call the NYC Well Hotline at 1-888-NYC-WELL (1-888-692-9355) and indicate that you need to find a mental health provider who accepts the Essential Plan.

### Additional Resources Regarding Mental Health and Substance Use Disorder Services

### If you need help finding a mental or behavioral health provider

**Call** 1-888-NYC-WELL (1-888-692-9355) or visit NYC Well Find Services

#### If you want to learn more about Qualified Health Plans and benefits:

Visit New York State of Health Qualified Health Plan Map

**Call** the NY State of Health Helpline at **1-855-355-5777 or TTY 1-800-662-122** and ask about OHPs.

Visit NYC Health Insurance Link

**Download** Qualified Health Plans at a Glance

**Download** New York Essential Health Benefits

#### If you have been denied mental health services

Depending on your insurance, you may be protected by Mental Health and Addiction Insurance "Parity" law.

Health plan members are also entitled to request and receive a copy of the most recent comparative analysis performed by their health insurance plan to assess compliance with federal parity laws and regulations. If your health insurance plan refuses to provide this information to you, you can call the Consumer Assistance Unit of the NYS Department of Financial Services at 1-800-342-3736 to get assistance. The <a href="New York State Office of Mental Health (OMH)">New York State Office of Mental Health (OMH)</a> provides additional information about mental health parity.

#### If you need help navigating the health care system

**Contact** Community Health Advocates (CHA), a program of the Community Service Society, for free help on how you access the health care you need. You can call the CHA Helpline at 1-888-614-5400.

Important Note: This information is compiled from government handbooks and webpages and relies on them for accuracy and is current as of December 17, 2021. It is provided here for your assistance and should not be taken as legal advice.