



MIT Health Plan

2008 Open Enrollment News

Understanding your mental health benefits

Key Questions about the transition to Blue Cross Blue Shield of MA Managed Care Behavioral Health Network

Effective January 1, 2008, the MIT Health Plans will move from Value Options to a new mental health benefits provider, BCBSMA Managed Care Behavioral Health Network. We expect this network change to enhance our members' access to mental health care and to simplify the member claim process. With the new network, our members will pay a fixed \$20 copay per visit instead of being responsible for a 25 percent coinsurance fee. There will be no change in the benefit level for services rendered by non-network providers.

How do I access mental health services?

As always, members of the MIT Health plans may see a clinician in MIT Medical's Mental Health Service for short-term, problem-focused care and/or mental health evaluations. MIT Medical clinicians can provide referrals to community resources, including clinicians in the BCBSMA Managed Care Behavioral Health Network. To learn more about the mental health services offered at MIT Medical, call 617-253-2916.

You may also begin seeing a community mental health provider on your own, without a specific referral. The BCBSMA network does not require that you seek prior authorization to begin outpatient therapy.

How do I find out if my current clinician is a participating network provider?

Most Value Options clinicians already participate in the BCBSMA Managed Care Behavioral Health Network program. If you are currently seeing a mental health professional, please speak to your clinician to verify her or his participation in our new network. Alternatively, to find out if a specific clinician is part of the network you may go to the "Find a doctor" link at <http://www.bluecrossma.com> and click on "I am a member searching for a provider." When the search form comes up, you can search by for a specific provider by name and see if he or she is listed as being affiliated with the BCBSMA Managed Care Behavioral Health Network.

We do not want to disrupt existing relationships for those already in treatment, so if you have any questions regarding your provider's network participation, please contact Claims & Member Services at 617-253-5979.

How do I find a new clinician who is a participating network provider?

MIT Medical's Mental Health Service (617-253-2916) can provide referrals to community clinicians in the BCBSMA Managed Care Behavioral Health Network. Alternatively, you may go to the "Find a doctor" link at <http://www.bluecrossma.com> and click on "I am a member searching for a provider." When the search form comes up, choose "search by provider type." Enter requested information about your geographic location and choose "Behavioral Health Professional" from the drop-down menu. You can search by for a specific provider by name and see if he or she is listed as being affiliated with the BCBSMA Managed Care Behavioral Health Network.

On the next screen, you will be prompted to narrow your search by specifying certain additional search options. On the "select a network" drop-down menu, be sure to choose "Managed Care Behavioral Health."

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Understanding your mental health benefits (continued)

How do I fill my prescriptions?

You may continue to fill your prescriptions at the MIT Pharmacy or at any participating Express Scripts pharmacy. In order to fill your prescription at the MIT Pharmacy (and take advantage of the lower co-pays), you will need to obtain a referral from the Health Plan. Please contact MIT Medical's Mental Health Service at 617-253-2916 to request this referral.

How do I contact Blue Cross Blue Shield of MA?

You will be issued a new Blue Cross Blue Shield of MA card that will include the contact information for the Managed Care Behavioral Health Network. However, if you need to contact BCBS prior to receiving your card, please call 1-877-566-2583. The BCBSMA Managed Care Behavioral Health Network does not require prior authorization before you begin outpatient therapy.

How much will it cost?

Your out-of-pocket cost is determined by the network status of the provider you are seeing. The chart below shows the difference in out-of-pocket cost between services provided by a network-affiliated clinician and services provided by a non-network-affiliated clinician.

Outpatient Mental Health and Substance Abuse Services	In network	Out of network
Plan pays	Fee-schedule amount less \$20 copay.	50 percent of Managed Care Behavioral Health Network fee-schedule amount, but not more than \$60 per visit.
Member pays	\$20 copayment; Provider may not bill member for any difference between provider fee and MIT payment.	Difference between provider fee and BCBSMA payment.

NOTE: There is an annual benefit limit of 50 outpatient visits per calendar year. This is a combined network and non-network benefit limit.

What about mental health services rendered in 2007?

Please note that all claims for services completed in 2007 should be submitted to Value Options by March 31, 2008. Value Options providers must submit all claims within 90 days of the service date. Members are encouraged to submit any claims for non-network services to Value Options by March 31, 2008 to ensure proper payment.

If you have any additional questions about your mental health benefits, please contact MIT Health Plans Claims & Member Services at (617) 253-5979. Claims & Member Services is located on the first floor of MIT Medical, next to Pediatrics. They can also be reached by e-mail: msservices@med.mit.edu

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