

## **MENTAL HEALTH AND CHEMICAL DEPENDENCY PROGRAM**

If you enroll in the Standard or Enhanced **POS** option, or Enhanced **Indemnity option**, the **Mental Health and Chemical Dependency Program** provides you and your **covered dependents** with benefits for treatment of mental health and **chemical dependency** conditions.

If you select an **HMO** for your medical option, the **Mental Health and Chemical Dependency Program** *does not* apply to you. Instead, you will receive mental health and **chemical dependency** benefits available through your **HMO**. Contact your **HMO** for specific information about the coverage available for treatment of these conditions.

If you are an International Assignee covered through **Aetna Global Benefits** under the International **Indemnity option**, the **Mental Health and Chemical Dependency Program** *does not* apply to you. Instead, you will receive the mental health and **chemical dependency** benefits available through **Aetna Global Benefits**. Contact **Aetna Global Benefits** (see “Important Contacts”) for specific information about the coverage available for treatment of these conditions.

### ***How the Mental Health and Chemical Dependency Program Works***

The **Mental Health and Chemical Dependency Program** gives you and your **covered dependents** the flexibility to seek **in-network** care through the **Behavioral Health Care Coordinator** or **out-of-network** care on your own.

**In-network** benefits provide you with a higher level of coverage and greater number of services. Generally, **network providers** are available in most areas. However, if the type of **provider** you need is not available in your area through the **network**, the **Behavioral Health Care Coordinator** will refer you to a local **provider** and you will receive the **in-network** level of benefits.

If you go **out-of-network**, you will receive a lower level of benefits. This means your share of the cost will be significantly higher. In addition, coverage for certain benefits may be limited or not available **out-of-network**.

### **Mental Health and Chemical Dependency Program Is Separate From Your Medical Option**

The **Mental Health and Chemical Dependency Program** is separate from the coverage available under your medical option and the **Prescription Drug Program**. Therefore, expenses incurred under one program *do not* apply under another.

Medical conditions caused by mental health or **chemical dependency** problems are **covered** under your medical option. However, your mental health and **chemical dependency provider** may ask you to involve your doctor in certain cases, or vice versa.

**Amount of Coverage**

The following charts show the coverage amounts, **in-network** and **out-of-network**, under the **Mental Health and Chemical Dependency Program**:

**PRECERTIFIED IN-NETWORK TREATMENT OF MENTAL HEALTH AND CHEMICAL DEPENDENCY CONDITIONS**

Service	In-Network Benefits (upon precertification)*	In-Network Benefit Limits**
<b>Out-patient or In-patient Care</b>		
First 5 Visits/Days per Calendar Year	No charge	
Additional Visits/Days in Same Year	\$15 per visit for the Enhanced <b>POS</b> or Enhanced <b>Indemnity option</b> ; \$25 per visit for the Standard <b>POS</b> option	Unlimited
<b>Alternative Treatment</b>		
First 5 Days per Calendar Year	No charge	
Days 6-120 in Same Calendar Year	\$15 per day for the Enhanced <b>POS</b> or Enhanced <b>Indemnity option</b> ; \$25 per day for the Standard <b>POS</b> option	120 days/year
*You must pre-certify any mental health or chemical dependency service to receive <b>in-network</b> benefits. **Visits or days utilized <b>in-network</b> apply toward <b>out-of-network</b> benefit limits. Limits accumulate separately for mental health or <b>chemical dependency</b> treatment.		

**OUT-OF-NETWORK TREATMENT OF MENTAL HEALTH AND CHEMICAL DEPENDENCY CONDITIONS**

Service	Deductible (\$400 per person)	Copayment	Coinsurance	Amount Above Allowable Amount	Precertification Penalty	Benefit Limits*
<b>Out-patient Care</b>	Applies	None	50%**	You pay, if any	Not applicable	60 visits/year
<b>In-patient (Hospital) Care***</b>	Applies	\$500 admission	50%**	You pay, if any	20% reduction (\$400 maximum per occurrence)	30 days/year
<b>Alternative Treatment</b>	Not covered out-of-network					
* Visits or days utilized <b>in-network</b> apply toward <b>out-of-network</b> benefit limits. Limits accumulate separately for mental health or <b>chemical dependency</b> treatment. ** Percentage paid by the Medical Plan applies to <b>allowable amounts</b> only. *** Must be precertified.						

**Covered Out-Patient Care**

Benefits are available under the **Mental Health and Chemical Dependency Program** for **out-patient** care provided by **physicians, mental health and chemical dependency professionals,** and facilities.

**Physician’s Services**

The following **physician’s** services are **covered** under the **Mental Health and Chemical Dependency Program**:

- Diagnosis and treatment of mental health and **chemical dependency** conditions
- Psychotherapy
- Prescription of therapeutic drugs, medications or other treatments specifically required by law to be performed or supervised by a medical doctor or D.O.
- **Chemical dependency** counseling
- Laboratory tests (including charges from independent medical laboratories)

## **Services Provided by Mental Health and Chemical Dependency Professionals**

The following services are **covered** under the **Mental Health and Chemical Dependency Program** if provided by **mental health and chemical dependency professionals**:

- Diagnosis and treatment of mental health and **chemical dependency** conditions
- Psychological testing
- Psychotherapy
- **Chemical dependency** counseling

However, for services to be **covered**, a **provider** may treat only those conditions, either mental health or **chemical dependency**, appropriate to his/her certification and licensing status.

### **Through a Facility**

The following **out-patient** services are **covered** under the **Mental Health and Chemical Dependency Program** if provided through eligible facilities and associated **providers**:

- Diagnosis of mental health and **chemical dependency** conditions
- Psychological testing
- Psychotherapy
- **Chemical dependency** counseling
- Laboratory testing performed by the facility

### **Covered In-Patient Care**

To receive the full amount of **in-patient** benefits available under the **Mental Health and Chemical Dependency Program**, you must precertify **in-network** or **out-of-network** admissions to an eligible **hospital**, acute psychiatric facility or acute **chemical dependency** facility.

The following **in-patient** services are **covered** under the **Mental Health and Chemical Dependency Program**:

- Semi-private room and board charges in the appropriate unit for the participant's condition (acute care, intensive care, isolation care or rehabilitation unit)
- Services provided in an **emergency** room
- Services and supplies normally provided by a **hospital** including any professional component of those services such as those provided by a psychiatrist, other **physician** or a **mental health and chemical dependency professional** (may include individual or group therapy for the patient and **covered dependents**, stress management, **occupational therapy** and educational and disease management programs integrated with a course of treatment)
- Detoxification services (except for a newborn, whose charges would be **covered** under your medical option, not the **Mental Health and Chemical Dependency Program**)
- Laboratory services

#### ***Covered Alternative Treatment (In-Network Only)***

**Alternative treatment** is **covered** only for **in-network** care that is precertified through the **Behavioral Health Care Coordinator**. It may include **partial hospitalization**, **residential treatment** and the services of a **group home or halfway house**. *No* benefits are provided for **out-of-network** care.

#### **Partial Hospitalization**

The following precertified **partial hospitalization** services are only **covered in-network** under the **Mental Health and Chemical Dependency Program**:

- **Covered** services as determined through **precertification** by the **Behavioral Health Care Coordinator** (may include treatments such as individual and group therapy)
- Medications administered during the daily visit

## **Residential Treatment**

The following precertified **residential treatment** services are only **covered in-network** under the **Mental Health and Chemical Dependency Program**:

- Room and board charges
- Drugs and medications administered to you while an **in-patient** at the **residential treatment** facility
- Services normally provided by a **residential treatment** facility, including services provided by the professional staff of the facility

## **Group Homes and Halfway Houses**

The following precertified services of a **group home or halfway house** are only **covered in-network** under the **Mental Health and Chemical Dependency Program**:

- Room and board charges
- Services normally provided by a **group home or halfway house**, including services provided by the professional staff of the facility

## ***In-Network Benefits***

When you go **in-network** under the **Mental Health and Chemical Dependency Program**, a higher level of benefits and services is available. Your first 5 authorized visits or days for **in-patient**, **out-patient** and **alternative care** are provided at no cost to you. Thereafter, you only pay a **copayment** for each visit or day in the **hospital** (\$25 under the Standard **POS** option, \$15 under the Enhanced **POS** option or Enhanced **Indemnity option**). No treatment maximums apply for **in-patient** or **out-patient** care, although the number of days available for **alternative treatment** is limited.

## **The Provider Network**

The **provider network** is a system of health care **providers** established by the **Behavioral Health Care Coordinator** who specialize in the treatment of **mental illness** and **chemical dependency**. The **network** includes:

- Psychiatrists (M.D. and D.O.)
- Licensed psychologists (Ph.D.)

- Master's degree level **mental health and chemical dependency professionals** including:
  - Clinical social workers (L.C.S.W. or A.C.S.W.)
  - Marriage, family and child counselors (M.F.C.C.)
  - Certified alcoholism counselors (C.A.C.) or certified **chemical dependency** counselors (C.C.D.C.)
- Master's degree level nurses

The **provider network** also includes treatment facilities, such as **hospitals** and **residential treatment** centers.

For more information, see "How the Mental Health and Chemical Dependency Program Works" and "In-Network Benefits."

### **Obtaining In-Network Benefits**

To receive **in-network** benefits, you must call **Aetna** and speak with a **Mental Health and Chemical Dependency Program** representative (**Behavioral Health Care Coordinator**). Use the Member Services telephone number printed on your medical ID card and select the appropriate prompt. When you call, the representative will determine the type of **provider** you need to see and will offer you choices of **network providers** to meet your needs. After your initial consultation, the **network provider** will arrange for any necessary treatment. *Note that if you do not precertify your care, you will not receive **in-network** benefits.*

You can find a **network specialist** using **Aetna's** DocFind. Go to [www.AetnaNavigator.com](http://www.AetnaNavigator.com) and click the DocFind<sup>®</sup> link. Select Provider Category "Behavioral Health" and then select the Provider Type. For the Plan Selection, under Aetna Open Access Plans, choose "Chioce POS II (Open Access)."

### **Emergency Care**

Counselors are accessible by telephone 24 hours a day, seven days a week. They can help you through an **emergency** and direct you to a **provider** for immediate assistance. In an **emergency**, you or your **covered dependent** should get care immediately by calling **Aetna** or your doctor, depending on the situation. For example, a drug overdose is a medical **emergency** and the immediate need should be to seek life saving medical treatment. In this case, **Aetna** and the **Mental Health and Chemical Dependency Program** will coordinate their responsibilities.

To receive **emergency** care benefits at the **in-network** level:

- The situation must qualify as a **mental health emergency** under the **Mental Health and Chemical Dependency Program**,
- You must receive treatment in a **hospital** setting (as an **in-patient** or through the emergency room), and
- You, your doctor or a family member must call **Aetna** Member Services within 48 hours after receiving treatment, if you are admitted. (If you are not admitted, it is still recommended that you call **Aetna** Member Services regarding appropriate follow-up care, but no penalty will apply for failing to call.)

If these conditions are not satisfied, benefits for **covered** services will not be paid.

**Emergency** care rendered by a **non-network provider** in an **out-patient** setting, such as a psychologist's office, is not **covered** at the **in-network** benefit level. For all non-in-patient facility **emergency** treatment, if you do not call **Aetna** Member Services first, you will receive only **out-of-network** benefits.

### **Receiving Care Away From Home**

The **Mental Health and Chemical Dependency Program** is available regardless of where you are when you need care. To receive care when you are away from home, call **Aetna** Member Services at the telephone number printed on your medical ID card and follow their instructions. If you are temporarily traveling outside the United States, **Aetna** will not be able to direct you to a **provider**. However, **emergency** care will be reimbursed at the **in-network** benefit level if you contact **Aetna** Member Services upon your return to the United States.

If you permanently reside outside the United States, both **emergency** and non-emergency care provided overseas will be reimbursed at the **in-network** level. You do not need to call **Aetna** Member Services.

### **Out-of-Network Benefits**

When you seek **out-of-network** care, you may use any **covered** mental health or **chemical dependency provider** you choose. However, the amount of **out-of-network** benefits available is significantly lower than those available for **in-network** care, limitations apply and certain services are not **covered**. Your cost for **out-of-network** care will be much higher than it would be for **in-network** care (see "Amount of Coverage"). You will have to pay:

- An annual **deductible**,
- A **coinsurance** percentage,

- A **copayment** for each hospitalization,
- Any benefit reductions due to failure to precertify a **hospital** admission,
- Any charges for expenses that are not **covered out-of-network** under the **Mental Health and Chemical Dependency Program**, and
- Any charges above the **allowable amount**.

There are other disadvantages as well. You are responsible for getting **precertification** for any **hospital** admissions (see “Precertification”) and submitting claim forms. Note that **out-of-network** benefits are not available if you use **network providers**.

### ***Filing a Claim***

Generally, you only need to file a claim for **out-of-network** care. You should include:

- Your (the Avaya Inc. employee’s) name and Social Security number,
- The patient’s name and Social Security number, in the case of a **covered dependent**,
- The service **provider’s** name, credentials and tax identification number,
- The dates of service,
- The CPT code and the diagnostic code, and
- The amount of the charge.

For **in-network** care, payment is arranged through your **provider** and **Aetna**.

### ***Aetna Member Services***

**Aetna** Member Service representatives are available to assist you with issues related to the **Mental Health and Chemical Dependency Program** Monday through Friday during normal business hours, or you can use the **Aetna** Navigator Web site 24 hours a day. You can reach **Aetna** Member Services at the telephone number printed on your medical ID card (see “Important Contacts”) or online at [www.AetnaNavigator.com](http://www.AetnaNavigator.com):

- To find out if a claim was paid,
- If you have a service issue with a **network provider**,

- To find out how your **covered dependent** living in another area should obtain care, or
- To get claim forms (generally only required for **out-of-network** care).