

BENEFIT PLAN DESIGN OUTLINE
Behavioral Health Benefit Overview
"GOLD" PLAN

General Comments:

To ensure full payment of benefit, each covered person and his/her dependents **must** contact ATAP before receiving treatment for mental illness or drug/alcohol addiction.

The number for ATAP is 800-258-6376 or 215-677-8820.

Claims received without an ATAP authorization should be reviewed with ATAP prior to denial. If they confirm that the service was not authorized, no payment will be issued.

General Benefits	In Network Benefits With ATAP Approval	Out of Network Benefits
Deductible	\$0	\$500 Individual/\$1,500 Family
Lifetime Maximum	Unlimited	Unlimited
Annual Copayment Maximum	\$2,000 Individual/\$4,000 Family	Not Applicable
Copays-Office Visits	\$20 Specialist	70% of allowance, after deductible
Annual Coinsurance Limit	None	\$3,000 Individual/\$9,000 Family
Coinsurance	None	70% of allowance, after deductible
Benefit's tracked by Plan Year or Calendar Year?	May-April - Plan Year	May-April - Plan Year
Dependents Covered Through	End of month in which they turn 26	End of month in which they turn 26
Additional medical benefits payable by Aicare?	Not applicable	Not Applicable
Inpatient Hospital Copays/Coinsurance - (Waived for the first admission but applied to subsequent admission within 12-month period)	\$150 copay per day up to 5 copays.	70% of allowance, after deductible
Inpatient Hospital Days	Unlimited	70 days per plan year
Mental Health Benefits	In Network Benefits With ATAP Approval	Out of Network Benefits
Psychiatric - Partial Day Facility Charges - <i>If a member is stepped down from an inpatient unit as a part of a continuum of care plan into a partial hospitalization program, then the copay will be waived. If the member goes into a partial program without the initial hospitalization admission, then the copay will be applied.</i>	\$20 copay	70% of allowance, after deductible
Psychiatric Room & Board Facility Charges - (Waived for the first admission but applied to subsequent admission within 12-month period)	\$150/copay per day, max 5 copays	70% of allowance, after deductible
Psychiatric Facility - Miscellaneous Facility Charges	Included in Room & Board Facility Charges	70% of allowance, after deductible
Psychiatric Facility - Outpatient	\$20 copay	70% of allowance, after deductible
Psychiatric Testing - Inpatient Professional Charges	Inpatient included in Room & Board Facility Charges.	70% of allowance, after deductible
Psychiatric Testing - Outpatient Professional Charges	\$20 copay	70% of allowance, after deductible
Psychotherapy - Inpatient Professional Charges	Included in Room & Board Facility Charges	70% of allowance, after deductible
Psychotherapy - Outpatient Professional Charges	\$20 copay	70% of allowance, after deductible
Substance Room & Board Facility Charges - (Waived for the first admission but applied to subsequent admission within 12-month period)	\$150/copay per day, max 5 copays	70% of allowance, after deductible
Substance Abuse - Inpatient Physician Visit	Included in Room & Board Facility Charges	70% of allowance, after deductible
Substance Abuse - Outpatient Physician Visit - <i>Therapist or Certified Addiction Counselor only.</i>	\$20 copay	70% of allowance, after deductible
Substance Abuse - Partial Day Facility Charges - <i>If a member is stepped down from an inpatient unit as a part of a continuum of care plan into a partial hospitalization program, then the copay will be waived. If the member goes into a partial program without the initial hospitalization admission, then the copay will be applied.</i>	\$20 copay	70% of allowance, after deductible
Substance Detox - Inpatient Facility Charges - (Waived for the first admission but applied to subsequent admission within 12-month period)	\$150/copay per day, max 5 copays	70% of allowance, after deductible
Substance Abuse Hospital Misc. Facility Charges	Included in Room & Board Facility Charges	70% of allowance, after deductible
Substance Abuse - Outpatient Facility Charges	\$20 copay	70% of allowance, after deductible
Pharmacological Management-Inpatient Physician Charges	Included in Room & Board Facility Charges	70% of allowance, after deductible