



Insurance Coverage for Behavioral Health Services in Massachusetts: Overview and FAQs

Overview

Insurance coverage for behavioral health services in Massachusetts has expanded significantly over the last decade. This expansion started with MassHealth's <u>Children's Behavioral Health Initiative (CBHI)</u>, which established a system of integrated behavioral health services and a comprehensive, community-based system of care. It was followed several years later by <u>Behavioral Health for Children and Adolescents (BHCA)</u>. Separately, insurance coverage for <u>autism treatments</u> were expanded through several pieces of legislation.

People have many different types of health insurance. The behavioral services covered under your plan depends on the type of insurance you have. It is important to understand the type of insurance you have, what behavioral health services your insurance is required to cover under Massachusetts (or federal) law, and what options you may have for expanding your current coverage. Below is an overview of the various types of health insurance you may have:

• Public – This is insurance coverage through MassHealth (Massachusetts Medicaid Program), or Medicare. There are many different types of MassHealth coverage. Eligibility for MassHealth, and the type of MassHealth, is determined by several factors, including income, age, and special circumstances (including having a disability). A person must be a Massachusetts resident to be eligible for MassHealth. U.S. citizenship is not required, but immigration status is a factor in determining what type of MassHealth a person is assigned. People with disabilities are usually eligible for MassHealth regardless of income, but they may be charged a premium if the household income is above a certain level. A person can be eligible for MassHealth, even if they have other insurance.









- **Private** Most private employers offer health insurance to their employees, but there are important differences between the two most common types of employer-sponsored plans:
- An employer may purchase health insurance from an insurance company on behalf of its
 employees. Under this arrangement, the insurance company is directly responsible for covering
 the health care costs of the employee (and the employee's family, in the case of family coverage).
 This is referred to as a <u>"fully funded" plan</u> (sometimes called a "fully insured" plan). Fully funded
 plans sold in Massachusetts are subject to state laws.
- An employer (usually a large employer) may pay directly for its employees' healthcare costs, rather than buying policies from an insurance company. This is referred to as a "self-funded" plan. Self-funded plans are subject to federal laws, but not to state laws. Although these plans are not required to follow the state laws, many of them do include some coverage for some behavioral services. Employers that set up self-funded plans often hire an insurance company or other outside administrator to process claims and other administrative functions.

Which type of plan you have may not be immediately obvious. For example, employees with fully funded and self-funded plans can have identical looking insurance cards (i.e., a United Healthcare card, with the same co-pays, deductibles, etc.).

Other types of private plans:

- Massachusetts state employees, and some municipal employees, receive their private insurance through the Group Insurance Commission (GIC).
- The Massachusetts Health Connector sells many types of plans. All plans include behavioral health services, but the type of coverage may vary depending on the specifics of the plan.
- o "Direct Buy" plans. These are plans that an individual purchases directly from an insurance carrier.









Behavioral Health Services under different plans

Type of Plan	Coverage	Notes:
MassHealth	YES	CBHI services are covered for children
		under 21 who have MassHealth Standard,
		CommonHealth. MassHealth Family
		Assistance covers some CBHI
		services.
Private Fully funded	YES	BHCA services are covered for children
		under 19. Out of State Fully funded plans
		may not include coverage.
Private Self-funded	Maybe	Contact your plan, or your HR
		Department. Covered services are
		described in the Summary Plan
		Description (SPD)
Massachusetts Health	YES	CBHI services are covered under
Connector		subsidized plans. BHCA services are
		covered under non-subsidized plans –
		(called QHP's)

Where do I start?

- 1. Determine what type of coverage you have.
- 2. Make a list of the behavioral services you need. Insurance only covers treatments considered to be "medically necessary." A person may need additional services and supports that are not covered by insurance.
- 3. Figure out if your insurance covers the services you need.
- 4. If the services are covered, determine what your out-of-pocket costs are (deductibles, co-pays, etc.). These can vary a great deal, from zero out-of-pocket cost to thousands of dollars. Note that most policies also have an "out of pocket maximum" cost. Once this cost is met, there are no additional co-pays, etc. for the rest of the year.
- 5. If you have private insurance, and it either doesn't cover the services you need or you want assistance with the out-of-pocket costs, you may want to consider applying for MassHealth CommonHealth as secondary insurance.









Frequently Asked Questions

Can a person have both private insurance and MassHealth? If so, which plan will be primary?

Yes, people can have private insurance and MassHealth. Private insurance will always be primary.

My child has private insurance through my employer and MassHealth as a secondary insurance, but my providers have difficulty dealing with the private insurance company. Can I drop this and just keep my child on MassHealth?

No. MassHealth is generally the "payer of last resort." A family CANNOT choose to drop their child from private insurance and rely solely on MassHealth.

Is MassHealth free for all people with disabilities?

No. Until the person turns 19, the premium is usually determined by family income. For those 19 and older, the premium is based on the applicant's income.

Are CBHI and BHCA services the same?

CBHI and BHCA services are very similar, but not exactly the same. CBHI services are covered up to age 21, and BHCA services are covered up to age 19.

Is a person required to have MassHealth to get co-pays covered for BHCA services?

Yes. In addition, the BHCA service provider must be a MassHealth provider.

Does MassHealth coverage expire?

No, but MassHealth periodically reviews the eligibility of covered persons. When MassHealth contacts you asking for updated information, it is critical that you respond in order to avoid the termination of MassHealth coverage.









Additional Information and Fact Sheets

- Available at CBH Knowledge Center
 - BHCA Fact Sheet
 - Getting help covering co-pays, deductibles, and other co-insurance
 - MassHealth CommonHealth
 - o Finding a Behavioral Health Provider
- Insurance Denials and Appeals
- CBHI Information

For further information, contact an information specialist at 774-455-4056 or e-mail us at AIRC@umassmed.edu



