



# Teamsters Union Local 282



## Welfare Trust Fund Mental Health & Substance Abuse Benefits Guide

Seeking treatment for mental health or substance abuse disorders for yourself or a family member can be very confusing, stressful and difficult. Use this guide to understand your mental health and substance abuse benefits—and how to make the best use of them.

### Stay In-Network—Save Money and Get Great Care!!!

When it comes to receiving treatment for mental health or substance abuse issues, choosing an in-network facility can mean **saving tens of thousands of dollars!**

The Fund covers in-network inpatient treatment for mental health and alcohol or substance abuse in full—that is, at no out-of-pocket cost to you. In-network outpatient treatment for mental health care is subject to a \$20 copayment.

**If you choose to go out of network for mental health and alcohol or substance abuse treatment, you may end up having significant out-of-pocket expenses.** Out-of-network services are subject to an annual \$400 individual/\$800 family deductible. Once you meet the deductible, the Plan provides payment at 80% of the network allowable rate until an annual out-of-pocket maximum of \$2,900 is met. Once you meet that maximum, the Plan provides payment at 100% of the network allowable rate.

It is important that Plan participants understand that the network allowable rate may be hundreds—and even thousands—of dollars less than what is charged by the treatment facility—and **you can be held liable for paying the difference.**

#### Substance Abuse Treatment Admission

*An example of the out-of-pocket expenses you might face when you go out of network*

Service Rendered	Amount Billed	Amount Paid	Member Responsibility
5 days detoxification	\$ 17,500	\$ 3,250	\$ 14,250
10 days residential	\$ 20,000	\$ 4,500	\$ 15,500
10 days day treatment	\$ 18,000	\$ 3,750	\$ 14,250
10 drug tests	\$ 11,000	\$ 4,000	\$ 7,000
<b>Total Member Responsibility</b>			<b>\$ 51,000</b>
<b>If the member had gone to an in-network facility, the out-of-pocket (Member Responsibility) cost would have been \$0.</b>			

# Local 282 Welfare Trust Fund

## Your Mental Health and Substance Abuse Coverage



MENTAL HEALTH TREATMENT	IN-NETWORK	OUT-OF-NETWORK (Subject to \$400/\$800 Deductible)
OUTPATIENT <i>As Medically Necessary</i>	\$20 copayment per visit	Plan pays 80% of network allowable rate until out-of-pocket maximum is met; then Plan pays 100% of network allowable rate
INPATIENT* & PARTIAL HOSPITALIZATION* <i>As Medically Necessary</i>	\$0 out-of-pocket costs	Plan pays 80% of network allowable rate until out-of-pocket maximum is met; then Plan pays 100% of network allowable rate

ALCOHOL/ SUBSTANCE ABUSE TREATMENT	IN-NETWORK	OUT-OF-NETWORK (Subject to \$400/\$800 Deductible)
OUTPATIENT <i>As Medically Necessary</i>	\$20 copayment per visit	Plan pays 80% of network allowable rate until out-of-pocket maximum is met; then Plan pays 100% of network allowable rate
INPATIENT* & PARTIAL HOSPITALIZATION* <i>Includes detoxification and residential levels of care</i>	\$0 out-of-pocket costs	Plan pays 80% of network allowable rate until out-of-pocket maximum is met; then Plan pays 100% of network allowable rate

*\*These services require pre-certification.*

**Pre-Certification is Required for Certain Services.** All inpatient and partial hospitalization substance abuse and mental health treatment requires prior approval. Contact Teamster Center Services (or HIP, if you're covered by HIP) for more information. Any admission that does not receive prior approval **will not** be covered by the Fund.

Outpatient psychological or psychiatric care is covered, but the provider must be a licensed mental health professional. Accepted provider licenses include psychiatrists, psychologists, social workers, licensed marriage and family therapists, licensed professional counselors and nurse practitioners (NPs). Outpatient substance abuse services must be provided in a state-licensed clinic.

## Remember to Pre-Certify Before Being Admitted

The Plan requires you to call Teamster Center Services (TCS) before any inpatient or partial hospitalization admission for substance abuse, or for mental health treatment by a social worker. Any admission that does not receive prior approval **will not** be covered by the Fund. **The Plan does not require you to pre-certify outpatient mental health or substance abuse treatment services, but participants are advised to call TCS regarding outpatient services in order to get professional advice on selecting a provider.** You can contact TCS at (212) 235-5003 or toll-free at (800) 433-4827, Monday-Friday, 8:30 AM to 4:30 PM.

If your substance abuse or mental health condition is a medical emergency and requires immediate treatment during non-business hours, you can contact TCS on the first business day following your admission for treatment to request pre-certification. Since you can obtain treatment in an emergency without TCS's prior approval, the Plan will not treat a request for pre-certification as an urgent claim within the meaning of the claim procedures.

TCS has rate arrangements with many substance abuse treatment facilities, through which your out-of-pocket expenses may be substantially limited or eliminated altogether. In addition, if you are admitted to a non-TCS facility, once you contact TCS on the first available business day, TCS may be able to arrange a transfer to, or may refer you to, a facility that has an arrangement with TCS. It is in your interest to contact TCS before any treatment to understand the amounts payable for substance abuse and mental health services under your Plan and to obtain the maximum benefits possible with the least out-of-pocket expense.

## Tips for Avoiding Dishonest Treatment Programs

Over the past decade, there has been a significant increase in the number of substance abuse treatment programs nationwide. Unfortunately, some of these new programs were created solely as a means to take advantage of the huge number of insured individuals who need addiction treatment.

Here are some tactics frequently used by unethical treatment programs that you should look out for.

- **Attractive Websites and Promises to “Accept Your Insurance.”** Many treatment programs have constructed very attractive websites, featuring photos of beaches, pools and luxurious accommodations to attract patients. These sites often include the logos of insurance carriers to imply that the program is in-network with those carriers. However, the reality is often that the facilities are not contracted with those carriers—and the amenities pictured often do not exist at that facility.
- **Patient Brokering.** Some programs pay commissions to brokers who convince people to enroll in their treatment programs. These brokers often seek out people at self-help meetings and hospital detoxification units. They frequently describe themselves as interventionists, treatment specialists and referral experts.
- **Hijacking Internet Searches.** Sophisticated (and unethical) programs manipulate Google search analytics to ensure that their facility website shows up at the top of any search for key search terms, such as “drug abuse” or “rehab.” Some programs have gone as far as to set up fake websites that look like sites of other established treatment programs, but the phone numbers are for their program’s call center—not the established program.
- **Frequent, Unnecessary and Expensive Drug Testing.** Many unethical programs partner with a drug testing lab or open their own testing laboratory as a means of increasing profitability. These programs test patients several times a week and then bill the insurance company as much as \$12,000 per drug test.
- **Promises to Waive Deductibles and Copayments.** Treatment programs may offer to waive deductibles and copayments as a means of luring patients to come to their programs. This practice is not only unethical, it is also illegal.

Be on the lookout for these bad practices and always be sure to call TCS to check on any treatment program you might be considering.

# Local 282 Welfare Trust Fund

## About Teamster Center Services



TCS was established in 1962 by Teamsters Joint Council 16. It provides **free and confidential** advice and referrals for all behavioral health issues to Local 282 participants.

TCS is the Fund's employee assistance program and behavioral case management vendor. TCS approval is required for all inpatient and partial hospitalization admissions for mental health and/or substance abuse.

For assistance with pre-certification and referral services for alcohol and substance abuse, contact TCS. *(Participants covered under HIP Health Plan of New York must contact HIP for mental health and substance abuse benefits.)* TCS has negotiated arrangements with many substance abuse treatment facilities around the country. If you or your eligible dependents use these TCS-contracted facilities, your in-network benefit coverage will apply.

Be sure to contact TCS before you receive treatment to understand the amounts the Plan will cover, as well as to ensure you receive the maximum benefits available with the least out-of-pocket costs.

- You can contact TCS by calling (212) 235-5003 or toll-free at (800) 433-4827, Monday-Friday, 8:30 AM to 4:30 PM.



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## **Building a Healthy Foundation for Local 282 Members and Families**