L.A. Care Health Plan (L.A. Care) changed several mental health and substance use disorder benefits starting on January 1, 2016. A federal law, The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act (MHPAEA) require these changes.

The changes listed below start January 1, 2016. The Evidence of Coverage (EOC--also called the “Member Handbook”) is a written guide to the services the health plan covers and what you pay for services.

You can view and download an electronic copy of the 2016 EOC at our website www.lacare.org. You may also request a printed copy of the 2016 EOC by calling L.A. Care Member Services at 1.855.270.2327 (TTY/TDD 711).

Changes and Disclosures to Cost-Sharing
The amount you pay (also known as cost-Sharing) for certain mental health and substance use disorder services have changed or are further clarified in the coverage listed below. These services now have a $0 co-pay or $5 co-pay. The chart below lists the outpatient mental health and substance use disorder benefits with a cost-sharing change starting January 1, 2016.

Please note that application of mental health parity law and rules do not increase cost sharing.

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Specific Benefits Impacted</th>
<th>Current Cost-Sharing or Disclosure 2014/2015 EOC</th>
<th>Cost-Sharing as of 1/1/2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Use Disorder Treatment- Inpatient Care</td>
<td>Inpatient Acute detox; Inpatient Rehabilitation; Residential Detox; 23-Hour Observation</td>
<td>No co-payment</td>
<td>No co-payment</td>
</tr>
<tr>
<td>Type of Service</td>
<td>Specific Benefits Impacted</td>
<td>Current Cost-Sharing or Disclosure 2014/2015 EOC</td>
<td>Cost-Sharing as of 1/1/2016</td>
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<tr>
<td>-----------------------------------------------------</td>
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</tr>
<tr>
<td>Substance Use Disorder Treatment - Outpatient Visits</td>
<td>Diagnostic Evaluation; Opioid Replacement Therapy; Individual and Group Therapy; Crisis Intervention</td>
<td>$5 per visit</td>
<td>$5 per visit</td>
</tr>
<tr>
<td>Substance Use Disorder Treatment - Outpatient Facility-Based Services</td>
<td>Acute Partial Hospitalization; Intensive Outpatient</td>
<td>$2 per visit</td>
<td>No Co-payment</td>
</tr>
<tr>
<td>Mental Health - Inpatient care</td>
<td>23-Hour Observation; Adult Residential Treatment Services; Crisis Residential Treatment Services; Psychiatric Inpatient Hospital Services</td>
<td>23-Hour Observation ($0 co-pay); Adult Residential Treatment Services ($2 per visit); Crisis Residential Treatment Services ($2 per visit); Psychiatric Inpatient Hospital Services ($2 per visit)</td>
<td>No Co-payment</td>
</tr>
<tr>
<td>Mental Health - Outpatient Visits</td>
<td>Individual and Group Therapy; Medication Management; Diagnostic Evaluation; Psychological Testing; Crisis Intervention</td>
<td>$5 per visit</td>
<td>$5 per visit</td>
</tr>
<tr>
<td>Mental Health - Outpatient Facility-Based Services</td>
<td>Acute Partial Hospitalization; Intensive Outpatient; Behavioral Health Treatment for Autism Spectrum Disorders (includes Aspergers, Autism and Pervasive Development); Outpatient Electroconvulsive Therapy; Transcranial Magnetic Stimulation; Intensive Day Treatment.</td>
<td>Acute Partial Hospitalization ($0 co-pay); Intensive Outpatient ($0 co-pay); Behavioral Health Treatment for Autism Spectrum Disorders ($5 per visit); Outpatient Electroconvulsive Therapy ($5 per visit); Transcranial Magnetic Stimulation ($5 per visit); Intensive Day Treatment ($2 per visit)</td>
<td>No Copayment</td>
</tr>
</tbody>
</table>

**Changes to Treatment Limits and Prior Authorization**

L.A. Care’s Policy and Procedures have been updated with the following changes described below:

- The Plan has removed the limitation to the number of outpatient mental health/substance use disorder visits allowed regarding prior authorization.
The requirements to obtain prior authorization for some MH/SUD services have also changed.

L.A. Care’s definition of medical necessity previously included more restrictive language to describe the coverage of services. It now states that medically necessary services refer to “all covered services that are reasonable and necessary to protect life, prevent illness or disability, or to ease pain through the diagnosis or treatment of disease, illness or injury.”

Revisions to the EOC Concerning Mental Health and Substance Use Disorder Services

L.A. Care has revised the EOC to clarify the types of inpatient and outpatient services and treatment that L.A. Care provides for mental health and substance use disorders. The most significant changes can be found in the EOC sections described below.

For the 2016 PASC-SEIU Plan EOC:

- **How to Get Care, Behavioral Health Services**: Revised to clearly explain that the member may access Behavioral Health Services benefits directly without a PCP referral. Also, mental health and substance use Disorder services requiring prior authorization have been clarified.

- **Summary of Benefits**: Mental Health Inpatient Care, Mental Health Outpatient Visits, Mental Health - Outpatient Facility-Based Services, Substance Use Disorder Treatment – Inpatient Care, Substance Use Disorder Treatment – Outpatient Visits, and Substance Use Disorder- Outpatient Facility –Based Services sections have been revised to clarify an enrollee’s cost-sharing, services requiring prior authorization, and benefits covered by the Plan.

- **Plan Benefits**:
  - Added provisions related to Autism Spectrum Disorder, and Behavioral Health Treatment to identify the new terms for these conditions.
  - Describes benefits for “Mental Health Services” and “Substance Use Disorder” under a section titled “Behavioral Health Services.”
  - Updated the description of Emergency Services to include an example of a psychiatric emergency.

- **Exclusions and Limitations**:
  - Updated the following benefits which are now covered under certain conditions.
    - **Alternative Therapies**: Covered when newly approved as evidence-based practice and prescribed by a licensed physician and surgeon or by a licensed psychologist as Behavioral Health Treatment for pervasive developmental disorder or autism, and such treatment is provided pursuant to a treatment plan administered by qualified autism providers.
    - **Biofeedback**: Covered when Medically Necessary and prescribed by a licensed physician, surgeon or licensed psychologist.
■ **Definitions**: Updated the description of Behavioral Health Treatment, Severe Mental Illness, and Medical Necessity to include current mental health conditions covered. Added the definition of Behavioral Health Services.

**Questions**  
If you have questions about mental health and substance use disorder benefits, or how to access them, please contact L.A. Care Member Services at **1.855.270.2327** (TTY/TDD **711**).