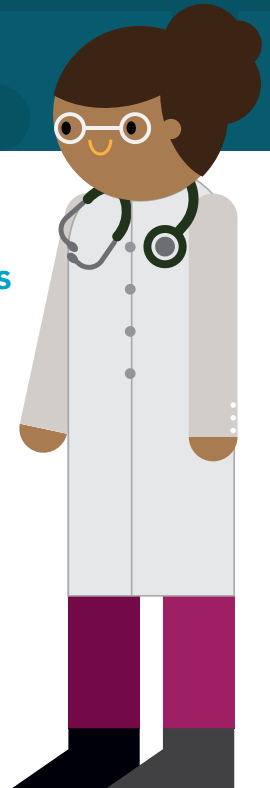


Health Coverage for Behavioral and Mental Health Services



Behavioral and mental health services are covered by all health plans offered through Maryland Health Connection, Maryland's official health insurance marketplace. It's important to know you can't be denied coverage or charged more because you have a pre-existing condition, including mental and behavioral health conditions.

Know what's covered

- Behavioral health treatment including psychotherapy and counseling
- Mental and behavioral health inpatient services
- Rehabilitative and habilitative services
- Prescription drugs
- Emergency services

Plans also cover free preventive services, including depression screenings for adults and behavioral assessments for children.

Browse plans and prices

Your specific behavioral health benefits will depend on the health plan you choose. You'll see a full list of what each plan covers, including behavioral health benefits, when you compare plans at **MarylandHealthConnection.gov**.

Each plan provides a Plan Costs and Benefits guide and Prescription Drug Search so you can review specific costs for services and medications.

Get financial help

Maryland Health Connection is the only place you can get financial help to lower the cost of your coverage. In fact, 9 out of 10 Marylanders who enrolled last year qualified for financial help to make health coverage more affordable.

Depending on your income, you may qualify for financial assistance that lowers out-of-pocket costs, including the deductible, when you enroll in a Silver-level plan through Maryland Health Connection. This kind of financial assistance is called a cost-sharing reduction. You also may qualify for a tax credit to lower your monthly premiums.

Keep in mind

- You may need to get pre-approved by your insurance company before you receive services, including inpatient admission for mental illness and emotional health disorders.
- Your physician or psychologist can do this for you by completing the necessary paperwork and submitting it to your insurance company.
- For an emergency inpatient admission for treatment of a mental illness or emotional health disorder, your insurance company must make a decision on whether to pre-authorize the inpatient treatment within two hours of receiving the request.



Know your rights

- If a patient is a threat or danger to himself or others, the insurance company cannot deny the first 24 hours of an admission as long as the patient's physician or psychologist determine it's a medical emergency. Notify the insurance company as soon as possible.
- If you believe that the insurance company is not following the law, or it denies an emergency admission, call the **Maryland Insurance Administration** at **1-800-492-6116**.

Get free help choosing the right plan

Maryland Health Connection has more than 1,000 trained experts statewide to help you for free. Visit **MarylandHealthConnection.gov/help** to search for an authorized health insurance broker who can provide free help choosing the best plan for your health needs.

Visit **MarylandHealthConnection.gov** to compare plans and costs, see what financial help you may qualify for, and enroll.

Download the free Enroll MHC mobile app to apply or find help from your phone or tablet.

