Choosing a Health Plan: Substance Use Disorder Treatment

Substance use disorder treatment is covered by all health plans. However, you will pay more for treatment under some plans than others. It’s important to know you can’t be denied coverage or charged more just because you have a pre-existing condition, including substance use disorder.

Consider your costs BEFORE your health insurance begins to pay for medical care.

When you enroll in a health plan, you usually need to pay a certain amount of money (the deductible) out-of-pocket each year before your insurance company begins to pay for medical services. This includes medical care that is usually recommended for people who are treated for substance use disorders.

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.

Consider your costs AFTER your health insurance begins to pay for medical care.

Some plans require you to pay either a percentage of the cost or a set rate of the cost of emergency room visits, inpatient and outpatient treatments and prescriptions, after you’ve met your deductible. However, some plans through Maryland Health Connection offer “no charge after deductible” for inpatient substance use and outpatient treatment services. That means that for some plans, all out-of-pocket spending on your health care counts toward your overall deductible and you’ll pay $0 for medical services after the deductible is met.

If you expect to need extensive inpatient and outpatient substance use treatment services with costs exceeding your deductible, you may want to consider a “no charge after deductible” plan.

What to look for when shopping at MarylandHealthConnection.gov

While shopping for a plan, look for the “Summary of Benefits and Coverage” document that shows specific costs, including after-deductible costs for common treatment services. You also can search by medications to see what each plan will charge by clicking “Plan Details” and “Prescription Drug (Formulary) Search.”
Examine the cost of the most common substance use disorder treatment services that you may be responsible for after meeting your deductible, such as:

- Emergency room visits
- Inpatient substance use disorder treatment
- Outpatient substance use disorder treatment, such as counseling services
- Prescription medication, including generic drugs, preferred and non-preferred brand drugs and specialty drugs

Some drugs that are frequently used to treat substance abuse include:

- Buprenorphine—Subutex (Opioid Use Disorder)
- Naloxone—Narcan (Opioid Use Disorder)
- Methadone—Dispensed in Opioid Treatment Programs only (Opioid Use Disorder)
- Naltrexone Extended Release Injectable—Vivitrol (Opioid Use Disorder and Alcohol Use Disorder)
- Acamprosate—Campral (Alcohol Use Disorder)
- Disulfiram—Antabuse (Alcohol Use Disorder)
- Buprenorphine/Naloxone combination—Suboxone, Zubsolv, Bunavail (Opioid Use Disorder)
- Smoking cessation products

Consider which doctors, hospitals and treatment centers accept your insurance.

- Make sure your preferred doctors, hospitals, treatment centers, pharmacists and specialists accept the insurance and the specific plan type. Check with them to see which plans they accept and confirm with the insurance company. PPO and POS plans have larger provider networks than HMO plans and are more expensive as a result.
- You’ll pay less for medical care if your medical care providers accept your health plan (called “in-network”). EPOs and HMOs cover only in-network care, except in an emergency.

Pre-approval of services may be required.

- You may need to get care pre-approved by your insurance company before you receive services. An in-network provider can do this for you.
- The network of providers for substance use disorder and mental/behavioral health may be provided by a different company.
- Contact your insurance company to see what company provides these services. Be sure to look at the provider list for the plan you want, and call to confirm participation.

GET FREE HELP CHOOSING THE RIGHT PLAN.

For help selecting a plan visit MarylandHealthConnection.gov/help to search for an authorized broker who can help you pick the best plan for your health needs. There is no fee when you use an authorized insurance broker.

Visit MarylandHealthConnection.gov to compare plans and costs and to enroll. Or go online to find free, in-person help near you or see what financial help you may qualify for.