Know Your Network for Behavioral Health Services

Knowing how your plan works can help you save money and get appropriate care.

You have a choice of where to go for behavioral health care. Choosing a provider in your Blue Cross and Blue Shield of Illinois (BCBSIL) plan's network can help you take advantage of the cost savings that come with your plan.

In Network or Out of Network – What's the Difference?

NETWORK PROVIDERS	OUT-OF-NETWORK PROVIDERS	
Meet BCBSIL standards for quality. We check education, training, licenses and quality of care.	Have not been checked by BCBSIL for quality.	
Charge an agreed-upon, discounted rate for BCBSIL members.	Set their own prices, which are often higher than network provider costs.	
May not bill you for more than the agreed-upon rate.	May bill you for any costs over what your plan allows.	
Have agreed to file claims so you don't have to.	Might require you to pay the full cost before you get service and file your own claims.	



Tips to Remember

Knowing how your plan works can help you avoid surprise charges.

- **Preauthorization from BCBSIL may be required** before getting certain tests or services. It is your responsibility to request this. Your provider may call the number on the back of your member ID card to request preauthorization for you.
- If you get care from an out-of-network provider, it is important to call BCBSIL to make sure the provider has preauthorized your service. You may be responsible for the cost of any services that were not approved.
- If you have an HMO, you may need a referral to see a behavioral health specialist. Ask your primary care doctor (PCP) to provide the referral.



We're Here to Help!

Log in to Blue Access for MembersSM at **bcbsil.com**, and click *Doctors & Hospitals* to locate a network provider.

Or call the number on the back of your member ID card if you need help to:

- Understand your behavioral health benefits
- Find a behavioral health professional in your network
- Learn if a service needs to be pre-authorized

Examples

If you visit providers in your network, you usually pay less for care. Take a look at some examples.¹



Robert has been feeling stressed and sad since his divorce six months ago.

These feelings don't seem to be getting better, and he'd like to see a mental health professional. Robert has an HMO plan with a \$40 copay for specialist office visits. His plan requires a referral from his PCP to a network provider. It does not cover out-of-network services. But Robert is thinking of calling a counselor that a friend suggested.

	NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
	Robert gets a referral from his PCP.	Robert visits the provider without a referral.
Charges	\$90 per visit for 10 visits, total \$900	\$130 per hour for 10 visits, total \$1,300
Copay	\$40	n/a
BCBSIL Plan Pays	\$500	\$0
Robert's Responsibility	\$400 (copay x 10 visits)	\$1,300

Robert will pay more than triple the cost for the same service if he goes out of network.



Mary's 17-year-old son, Daniel, is struggling with a substance use disorder.

Daniel is covered under Mary's PPO health plan. The plan's network benefits include a \$1,000 deductible per member and 20 percent coinsurance. Daniel's doctor suggests a seven-day inpatient treatment program. He recommends a nearby center with a good reputation that's in the plan's network. But Mary has found an out-of-state facility online. This facility's ad promises free airfare to the site and luxury features. She's not sure which treatment center she should choose.

	NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
	Gets Daniel's service authorized	Does not get Daniel's service authorized
Charges	\$800 per day, total \$5,600	\$1,500 per day, total \$10,500
Deductible	\$1,000	n/a
Coinsurance	\$920	n/a
BCBSIL Plan Pays	\$3,680	\$0
Mary's Responsibility	\$1,920 (deductible + coinsurance)	\$10,500

Mary will save more than \$8,000 if she chooses the network provider.

¹ Examples are for illustration only. No real member information has been used. Plan designs and costs will vary. Check your benefits information for details about your specific plan benefits.