



Questions about the Behavioral Health Transition

Q: Why is this change happening?

A: Integrating behavioral health and substance abuse benefit management into our benefit management spectrum will help allow us to deliver enhanced services to our members. Research has shown that integration of mental and physical health benefits and benefit management may lead to improved access to quality care and the ability to control health care costs.

Q: Will the providers in the Magellan Health Services network be available to members after January 1, 2008?

A: The provider network is expected to remain substantially the same, with little or no disruption to our members. Our goal is to match the network currently offered by Magellan Behavioral Health Services, as well as to add additional providers to provide a vast and vibrant network of behavioral health professionals.

Q: What if members continue to see their Magellan providers and he/she is not in the Empire Behavioral Health Care network?

A: In those circumstances where the member's provider chooses not to continue serving our membership by being part of our network, we will offer other options for members in an effort to help transition their care to a new in-network provider, if they choose. If members choose to continue with their current provider, depending on the plan design, the services that they receive may not be covered or they may be responsible for any differences in what their benefits allow and what the out-of-network doctor may charge them.

Q: Will the members be able to use the same phone number as they do today if they have questions about behavioral health?

A: Yes, members should continue to use the number on their member ID cards.

Q: How will my employees be notified of this change?

A: Via our website and our Fall member newsletter our general membership will be informed of the transition. Impacted members (members whose provider has not yet joined our new network) will be contacted directly approximately 30 days prior to the transition that will inform them of transition of care options.



Q: How does this change impact my employees' health care?

A: Members can continue to obtain services from their current Magellan providers through January 1, 2008. As part of this integration, the provider network is being reviewed and expanded where necessary to include a comprehensive network of mental health physicians and practitioners. If any of your employees are currently obtaining care from Magellan providers who are not planning to join our network, we will assist them with questions and clearly communicate their options for receiving care.

Q: What about Continuity of Care?

A: We understand that continuity of care is very important for successful outcomes. As the effective date of this transition draws closer, if a member is currently in treatment, a plan will be executed to address inpatient and outpatient care. Prior to the effective date, if the member's current provider does not plan to participate, an Empire Care Manager will contact the provider to help ensure continuity of care during the transition.

Q: Will my employees be able to use out-of-network providers?

A: If any member's current Magellan provider chooses not to join our network, we will offer options to assist in the transition of care to an in-network provider of the member's choice. This transition will occur over a 90-day period. The ability to use out-of-network providers depends on the benefit plan design. If members choose to continue with their current provider, depending on the plan design, the services that they receive may not be covered or they may be responsible for any differences in what their benefits allow and what the out-of-network doctor may charge them.

Q: How do members handle any claims/appeal questions that were incurred before the transition date?

A: Magellan will continue to handle all adjustments and appeals associated with expenses incurred before the transition date. If Magellan handled a claim originally, Magellan will continue to handle it until all issues associated with the claim are resolved.