

HOW ARE YOU COVERED?

How you get your health care coverage determines what substance use disorder (SUD) treatment, such as for opioid addiction, you are eligible for, and how much you may have to pay toward that treatment.



LOOKING FOR MORE INFORMATION?

Visit www.insurance.pa.gov for additional information on mental health parity and substance use disorder treatment.

If you have a question or think your insurance is not covering your treatment properly, you can contact the Insurance Department's consumer services bureau at our website or by phone at 1-877-881-6388.



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INSURANCE DEPARTMENT

SUBSTANCE USE DISORDER & YOUR INSURANCE COVERAGE

HOW YOUR COVERAGE CAN IMPACT TREATMENT OPTIONS



A GOVERNMENT PROGRAM

If you have government coverage through Medicaid (also called Medical Assistance) or CHIP, you have SUD treatment coverage. Check with your program to find out exactly what benefits you have. If you have Medicare, you may have coverage depending on the type of treatment you need.

Check with your program to see if you are covered.

THROUGH THE INDIVIDUAL MARKET

If you buy your health insurance yourself at Healthcare.gov or directly through an insurance company or agent, you are covered for SUD treatment as long as the plan complies with the Affordable Care Act (ACA).

THROUGH AN EMPLOYER

If your coverage is through your employer, you may or may not be covered for SUD treatment. Many companies are self-insured, which means the company itself pays the claims even if it hires someone else to do the paperwork. Self-insured companies are NOT required to provide SUD coverage, but many do.

If you work for a company that buys coverage from a commercial insurer, Pennsylvania law guarantees that you are covered for SUD treatment.

Talk with your Human Resources department to find out if your company provides SUD coverage.

IMPORTANT!

If your insurance or employer plan covers mental health and substance use disorder benefits, the insurance plan must offer the same level of benefits as it does for medical or surgical treatment.

This is called **parity**.

EXAMPLES OF WHAT IS SUBJECT TO PARITY RULES:

- **Number of outpatient visits covered**
- **Out-of-pocket costs (Co-pays, co-insurance, and deductible)**
- **Prior authorization requirements**
- **Your provider network and payment for out-of-network services**
- **Criteria used to determine medical necessity**