

How Do I Get Started?

If you want to access your MHSa benefit, ask a question, or request a service, simply call our toll-free number. You will be immediately connected to an experienced Optum Specialist who will help you determine which type(s) of service you need. Available any time, our friendly and supportive staff are expert in helping people identify the nature of their problems and finding the right resources to address them.

What Happens When I Call Optum?

An Optum Specialist will ask you a few questions to help you identify the best resource to assist you with your personal situation. Then, he or she will locate a local Optum network provider who is experienced in helping people with problems similar to yours. We will make every effort to satisfy your unique requirements, such as gender preference or language needs. The Optum Specialist will give you all the information you need to schedule a convenient appointment with a provider.

Do My MHSa Services Cost Anything?

There is no charge for calling Optum or for obtaining referrals to a network provider. Services received through your MHSa benefit may require pre-authorization and/or a copayment. To determine your level of coverage, please refer to your employer-provided benefit information.

Are Services Confidential?

Maintaining the confidentiality of MHSa services is a fundamental right to which everyone is entitled. All records, including medical information, referrals, and evaluations, are kept confidential in accordance with federal and state laws.

What Should I Do in an Emergency?

If your situation is life threatening, you should go directly to a hospital emergency room or call 911 for assistance. Always keep the toll-free number of your medical insurance carrier in a convenient place, in case an emergency arises. If you have a question and don't know what to do, you can always call Optum for help.

Who Will Provide Services to Me?

Optum maintains a large and diverse network of licensed and certified professionals who will help you overcome the difficulty you are facing. These experts include licensed master's-level counselors, psychologists, psychiatrists, Substance Abuse Professionals (SAPs), and Marriage and Family Therapists (MFTs). These providers have a wide array of practice specialties, such as child and adolescent, geropsychiatric, post-traumatic stress, eating disorders, alcohol or drug dependency, and many others.

What Company Manages My MHSa Benefit?

Your employer has selected Optum to manage your MHSa services. Founded in 1979, Optum is a nationally respected company that specializes in providing behavioral health care services to more than 18 million people across the country. Optum's experience means that you can feel confident in the services you receive, whether you need help with an everyday concern or a very difficult crisis.

Whenever you need help with any of life's concerns, please call our toll-free number:

1-800-924-0105 Toll-free

Mental Health & Substance Abuse Benefit



Call Toll-free

1-800-924-0105

1-800-824-4306 (TDD)



Your Mental Health and Substance Abuse (MHSA) benefit can give you the care and support you need when problems are too difficult to work through alone.

What Can My MHSA Benefit Help Me With?

Through your MHSA benefit, you have access to in-person support for a wide range of concerns, such as:

- Managing stress
- Depression
- Eating disorders
- Coping with grief and loss
- Alcohol or drug dependency
- Anger management
- Anxiety
- Mental disorders
- Physical abuse
- Schizophrenia
- Mood disorders
- Compulsive gambling

What Does My MHSA Benefit Cover?

To help you address serious concerns, such as emotional problems or alcohol or drug dependency, the following types of services are covered by your MHSA benefit:

- Acute inpatient care
- Residential treatment
- Partial day treatment
- Medication management
- Halfway homes
- Family, marital, and group therapy
- Alcohol or drug dependency programs
- Individual outpatient therapy

To maximize your successful recovery, your benefit also includes follow-up services.

Mental Health and Substance Abuse Benefit

	PPO Option		HMO Option		CDHP Option		Bronze Plan Option	
	In Network	Out-of-Network*	In Network	Out-of-Network*	In Network	Out-of-Network*	In Network	Out-of-Network*
Annual Deductible	None	\$400 per individual	None	None	\$1,500 individual; HRA credit reduces this to \$500 \$3,000 family; HRA credit reduces this to \$1,000	\$1,500 individual; HRA credit reduces this to \$500 \$3,000 family; HRA credit reduces this to \$1,000	\$6,600 individual \$13,200 family	\$7,000 individual \$14,000 family
Plan Payment After Copay	100%	70% after deductible	100%	70%	100% after deductible	70% after deductible	100% plan allowance after deductible and out-of-pocket maximum	70% plan allowance after deductible; 100% plan allowance after out-of-pocket maximum
Out-of-Pocket Maximums*	\$6,600 individual \$13,200 family	\$1,500 individual \$3,000 family	\$6,600 individual \$13,200 family	N/A	\$6,600 individual \$13,200 family	\$4,500 individual; HRA credit reduces this to \$3,500 \$9,000 family; HRA credit reduces this to \$7,000	\$6,600 individual \$13,200 family	\$9,600 individual \$19,200 family
Pre-authorization Penalty	None	20% reduction in payment for non-notification	None	None	None	20% reduction in payment for non-notification	None	20% reduction in payment for non-notification
Outpatient								
Visit Limits	None	None	None	None	None	None	None	None
Copayments Mental Health	\$15	None (there is coinsurance)	\$15	None (there is coinsurance)	Covered 100% after deductible	None (there is coinsurance)	100% plan allowance after deductible and out-of-pocket maximum	70% plan allowance after deductible; 100% plan allowance after out-of-pocket maximum
Copayments Substance Abuse	None	None (there is coinsurance)	None	None (there is coinsurance)	Covered 100% after deductible	None (there is coinsurance)	100% plan allowance after deductible and out-of-pocket maximum	70% plan allowance after deductible; 100% plan allowance after out-of-pocket maximum
Emergency Room Copay	\$50 waived if visit leads to an inpatient admission		\$50 waived if visit leads to an inpatient admission		Covered 100% after deductible		100% plan allowance after deductible and out-of-pocket maximum	70% plan allowance after deductible; 100% plan allowance after out-of-pocket maximum
Inpatient								
Visit Limits	None	None	None	None	None	None	None	None
Copayments	None	None (there is coinsurance)	None	None (there is coinsurance)	Covered 100% after deductible	None (there is coinsurance)	100% plan allowance after deductible and out-of-pocket maximum	70% plan allowance after deductible; 100% plan allowance after out-of-pocket maximum

*In-network Out-of-Pocket Maximum includes costs for medical, mental health and substance abuse benefits and prescription drug costs.