

Behavioral Health, Chemical Dependency and Member Assistance Coverage Provided Through PacifiCare Behavioral Health (PBH)

For Self Funded PPO and Blue Shield HMO Participants and Dependents

	Pre- 2/1/2010 PBH Coverage		Post Parity Compliance- Effective 02/01/2010	
	In PBH Network	Out of PBH Network	In PBH Network	Out of PBH Network
MEMBER ASSISTANCE PROGRAM	3-visits per problem at No Charge	N/A	3-visits per problem at No Charge	N/A
BEHAVIORAL HEALTH & CHEMICAL DEPENDENCY				
Annual Maximum	None	N/A	\$750,000	
Lifetime Max	None	N/A	\$2,000,000	
Calendar Year Deductible	\$0	N/A	\$0	\$100 per person/\$200 maximum per Family
Out of Pocket (OOP) Maximum	N/A	N/A	N/A	\$1,500
Per Admission Fee	None	N/A	None	\$0
Day Limit Inpatient	30	N/A	Unlimited	Unlimited
Copayment/Coinsurance InPatient	\$0	N/A	\$0	60% Coverage Until OOP is met, then 80% Coverage
Visit Limit Out Patient	\$30	N/A	Unlimited	Unlimited
Copayment/Coinsurance Out Patient	\$0	N/A	\$0	60% Coverage Until OOP is met, then 80% Coverage
Emergency Room Services	Covered at 100% Contract Rate	N/A	Covered at 100% Contract Rate	60% Coverage Until OOP is met, then 80% Coverage
Chemical Dependency Services	100% coverage subject to \$25,000 Annual and \$35,000 Lifetime Maximums	N/A	100% coverage Based Upon Medical Necessity	60% Coverage Until OOP is met, then 80% Coverage