



Patty's Points



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Feeling stressed or overwhelmed? Did you know your benefits include consultations with a Behavioral Health Counselor at no cost to you through the Employee Assistance Program (EAP)?

Dear Patty,

Q: How do I find a provider in the District's Employee Assistance Program (EAP)?

A: You may call 1-800-624-5544 to find a provider.

Q: I exhausted my **five no cost sessions per issue** with a counselor through the District's EAP (Employee Assistance Program). Can I continue with the same counselor using my Florida Blue benefits?

A: Yes, as long as the counselor is a participating provider, then you may continue your sessions at \$35 copay per visit.



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Q: How do I find an in-network behavioral health specialist (i.e., behavioral health counselor, Psychiatrist, etc.) who accepts my Florida Blue insurance?

A: You may call New Directions Behavioral Health at 1-866-287-9569, 24 hours a day, 7 days a week. Please click [here](#) for more information.

Q: What is the office copay for consultations with an ***in-network*** behavioral health specialist?

A: The copay per visit is \$35 for virtual and office visits, regardless of which health plan you are enrolled in.

Please note: Effective January 1, 2023 the copays will be \$40 for the HMO Basic and BlueOptions PPO standard Plans. Virtual visits will remain at \$35 copay for all three plans.

Q: Are there limits to the number of visits?

A: No, there are no limits to the number of visits for Behavioral health services.



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Q: My son was just diagnosed with an Autism Spectrum Disorder. He needs therapy. What services are covered under the District's health plans?

A: Services can include: Speech Therapy, Physical Therapy, Occupational Therapy, and Behavioral Analysis (ABA services).

Autism Spectrum Disorders include the following diagnosis:

- Autistic Disorder
- Asperger's Disorder
- Childhood Disintegrative Disorder
- Pervasive Development Disorder

Note: Member must be under age 18 or still be attending high school. Also, member must have been diagnosed with Autism Spectrum Disorder prior to his or her 9th birthday.

Q: Do the above services require prior authorization?

A: Yes, Providers must obtain authorization for services. The following is recommended to assure coverage:

- Signed order or treatment plan from ordering physician
- Diagnostic Report(s) indicating diagnosis of Autism Spectrum Disorder
- Completed Treatment Plan to include all services related to the DSM IV diagnosis