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As we return to work and parents are sending their kids back to school – whether physically or virtually, many may be feeling stress and anxiety. Rest assure that you have the District's Employee Assistance Program (EAP) as a resource and Behavioral Health Benefits of your health plan.

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. Please click <u>here</u> for more information.
- 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.



- Q: How do I find an in-network behavioral health specialist (i.e., behavioral health counselor, Psychiatrist, etc.)
- A: You may call New Directions Behavioral Health at 1-866-287-9569, 24 hours a day, 7 days a week. Please click <u>here</u> 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, regardless of which health plan you are enrolled in.
- Q: Are there limits to the number of visits?
- A: No, there are no limits to the number of visits for Behavioral health services.
- Q: My son was just diagnosed with 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).







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Autism Spectrum Disorders include the following diagnosis:

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

Note: Member must be under age18 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