



**Maryland**  
INSURANCE ADMINISTRATION

# CONSUMER ADVISORY

## GETTING STARTED WITH HELP FOR MENTAL HEALTH AND SUBSTANCE USE

Mental health and substance use affect Marylanders from all walks of life. Mental health and substance use are common and often serious, but many people do recover with access to proper healthcare. You should treat your mental health as seriously as you treat your physical health. If you need help, but don't know where to find it, this advisory may help you.

### Insurance

Your health insurance may cover all or part of the cost of your mental health services, depending upon the type of care you need and the terms of your policy. **Maryland law requires health benefit plans issued in Maryland to cover mental health services, but you may have coverage through a plan that is not subject to Maryland law.**

- If you have private insurance, you should check your policy for your benefits. You should have a policy, certificate of coverage, or summary plan document that describes your health plan's benefits. If you cannot find your documents or have questions about your benefits, you can also call the member services number on the back of your card. There may be a separate number for mental health services.

Use the interactive tool to learn how to understand your insurance card:

<https://content.naic.org/consumer/health-insurance/understand-your-insurance-card.htm>

CONTINUED

# CONTINUED

---

## Finding a provider

Your primary care provider may be able to help by assessing your symptoms, and if appropriate, refer you to a mental health care professional. And remember, any conversation you have with your primary care provider is confidential. In some cases, you may be referred to a mental health provider who determines the most appropriate type of care and refers you to another provider.

To find an in-network provider, you can use your carrier's provider directory. Most health plans have online provider directories, but you can also call the carrier's member services department to request the names of providers. If you use the online directory, be sure to use the correct plan name to find the correct network; your card should have your health plan name. After you locate a name, it is a good idea to call the provider's office and the health plan to confirm that the provider is still participating and accepting new patients. Since not all providers at a location may be participating ("in-network"), you should ask about the specific provider you plan to see.

Sometimes, you may not be able to get the health care that you need from a mental health or substance use disorder specialist who is in your insurance company's network. The in-network specialist may be unreasonably far away, or might not have an appointment for an unreasonably long time, or may not be able to treat your condition. When that happens, and you have to go to a specialist that is out-of-network, your insurance company may have to cover the out-of-network specialist the same as they would an in-network specialist.

Beginning on January 1, 2023, if you are approved to see an out-of-network specialist for mental health or substance use disorder services, your health plan must pay the costs of the out-of-network specialist's services other than your cost-sharing amount (deductible, copay, coinsurance), which you must pay. Your health plan must ensure that the approved out-of-network services cost you no more than you would have paid if you received the services from a provider on the plan's provider panel. This means there will be no balance bill.

Your health insurance company has to have a process that you can use to find out how to get in-network coverage for care by an out-of-network specialist. And when you make your request, they have to respond quickly. You can contact your health plan using the number on the back of your card, or use the link: <https://bit.ly/miaccp> to find out the process to use for your insurance company.

CONTINUED 

## CONTINUED

---

### What if I need help urgently?

Call your mental health provider or your primary care provider and ask for an urgent appointment. You can also ask your primary care provider for names of mental health providers, and if your insurance requires it, a referral. You may also find these phone numbers useful:

You should always call 9-1-1 in life threatening emergencies.

Crisis hotlines are available to help people work their way through difficult times and towards safety and can also assist in finding a local provider:

- 988 Suicide & Crisis Lifeline: 9-8-8
  - press 1 for the Veterans Crisis Line
  - press 2 for Spanish
  - press 3 for LGBTQ+ support
  - Text 988 (English and Spanish)
  - Chat online: 988Lifeline.org
  - Learn more: 988.maryland.gov
- Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline: 1-800-662-HELP (4357) or send your zip code via text message: 435748 (HELP4U)
- National Hopeline Network, Suicide & Crisis Hotline 1-800-442-HOPE(4673)
- National Suicide Prevention Lifeline: 1-800-273-TALK (8255)



### What if I have a problem with my health plan?

The Maryland Insurance Administration has more detailed information about health insurance and coverage for mental health services available on its website at <https://insurance.maryland.gov/Consumer/Pages/HealthCoverage.aspx> or you can contact us at 800-492-6116 or 410-468-2000.

Have you been denied insurance coverage for medically necessary care or emergency appeals? You have the right to appeal denial decisions. Call our 24/7 Hotline at 1-800-492-6116 or visit our website for more information:

<https://insurance.maryland.gov/Consumer/Pages/AppealsAndGrievances.aspx>



**MEDICAL NECESSITY &  
EMERGENCY APPEALS**  
**1-800-492-6116**