

Aviagen Group

Behavioral Health Benefits Summary

BHS Exclusive Provider Network BHS Precertification/Medical Necessity Approval Required

Employee Assistance Program

- Initial Assessment & Two (2) Visits Paid at 100% when BHS PPO Network is Used
- Available to all Employees and Dependents
- Coverage for all In-Network Qualified/Licensed Professionals
- May be used for Legal and Financial Consultation, Elder Care Guidance, as well as Assessment and Counseling for other Individual and Family Issues

Outpatient

Mental Health and Substance Abuse

- Covered at 100% of Allowed Amount
- \$25 per Visit Copay
- No Deductible

Substance Abuse Intensive Outpatient Program (IOP)

- Covered at 100% of Allowed Amount
- No Copay
- No Deductible
- Completion of BHS-Approved Aftercare Program
May be Required for Future Benefit Eligibility

Inpatient

Mental Health and Substance Abuse

- Covered at 100% of Allowed Amount
- \$200 Deductible per Admission
- No Copay
- Completion of BHS-Approved Aftercare Program
May be Required for Future Benefit Eligibility

Out-of-Network Benefits

- Match Those of the Group Health Plan
- Subject to Applicable Copays and Deductibles
- All Plan Requirements for Precertification, Medical Necessity and Covered Services Apply



BEHAVIORAL HEALTH SYSTEMS

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