

# **BRADMAN/UNIPSYCH COMPANIES EMPLOYEE HANDBOOK**



## **BRADMAN/UNIPSYCH COMPANIES MENTAL HEALTH, SUBSTANCE ABUSE AND EMPLOYEE ASSISTANCE PROGRAM BENEFITS**

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## NOTICE

**Bradman/UniPsych Companies provide management services. As an independent practitioner, your mental health provider is solely responsible for your clinical care and questions pertaining to your care should be addressed to her/him. Bradman/UniPsych Companies and its contracted providers comply with all applicable Federal and State laws and regulations concerning the confidentiality of medical, mental health and substance abuse communications and records. For additional information, please refer to the Master Agreement.**

# INTRODUCTION

**Bradman/UniPsych companies provide mental health, substance abuse and Employee Assistance Program services.**

**The Employee Assistance Program (EAP) provides a variety of counseling and informational services. The EAP is available for problems not normally covered under the mental health provisions in your Group Health Plan, such as stress, weight loss, financial issues, family problems, etc. It can also be used for information and referral if you need help determining how to tackle a personal or workplace problem. A supervisor may also refer an employee to the EAP if it appears personal issues are interfering with work performance. Basically, the EAP is a tool for you to use to regain equilibrium during a stressful period.**

**You and your family members are eligible for up to six visits to an approved EAP provider, at no cost to you. You do not need to be covered by your Group Health Plan to use the EAP. However, if you receive a mental health diagnosis and require formal treatment you may access Group Health Plan benefits, if you (or your dependents) are eligible. The goal is to receive early intervention before the issue becomes a more serious problem.**

**Your employer receives no records of EAP visits with names attached, only the number of visits per counselor will be received. Your visits will remain confidential. If an employee is referred by a supervisor, your employer will receive only confirmation of attendance. For any other information to be shared, the employee would have to sign a written release form prior to the sessions. Therefore, all discussions are confidential unless the employee knowingly requests otherwise.**

**To further enhance your mental health benefits for those employees and dependents who are covered under your Group Health Plan, Bradman/UniPsych Companies are also your mental health network providers.**

**For mental health outpatient visits you pay the first \$10, up to a maximum of 32 outpatient visits per contract year. For each inpatient admission under the mental and substance abuse benefit, you are responsible for a \$100 copayment, with coverage up to 31 days per contract year.**

**Mental Health/Substance Abuse copayments are independent of and separate from any deductibles or copayments which apply to the other**

benefits under your Group Health Plan. These fees are extremely reasonable and hopefully will not prevent you or a family member from seeking assistance when needed. In order for services to be authorized, you must contact The Bradman Network, 1-800-272-3626. If out-of-network services are authorized through the "800" number, they will be paid at Network fee schedule.

To schedule an appointment and discuss treatment providers, call 1-800-272-3626 (1-800-BRADMAN). If you currently have a treatment provider that is not in The Bradman Network, ask that provider to call (or you can call) the same 800 number and submit his/her name for inclusion in the Network. The application process is relatively easy, although not every provider is admitted to the Network.

If you wish to learn additional details about the program including other coverage provisions and limitations, contact Bradman/UniPsych's Intake Department at 1-800-272-3626.

Any member who has a complaint is encouraged to contact Bradman/UniPsych's Grievance Coordinator at 1-800-272-3626. The Grievance Coordinator will collect all of the pertinent data from the member, then be responsible to fully research the complaint and determine an appropriate resolution.

Any member who has a question regarding a payment issue, please contact Bradman/UniPsych's Provider Payment Department at 1-800-272-3626.

Bradman/UniPsych has made a commitment to a higher quality of care, but without increased costs and out-of-pocket expenses. With this EAP, Mental Health and Substance Abuse program, we are confident that we can effectively assist you and your family members.

## **SCHEDULING INFORMATION**

Corporate Office business hours are Monday through Friday, 8:30 am to 5:00 pm. However, we are always available through our live-answered, toll-free telephone number, 1-800-BRADMAN (1-800-272-3626). Our conveniently located Network of providers will be available to provide timely clinical intake, assessment, evaluation, counseling, treatment planning, case management, referral and follow-up.

To schedule an appointment, first contact our Intake Department for authorization through the toll-free number. This line is answered by trained Intake representatives under supervision of an experienced, licensed and insured Clinical Director. There is also an emergency

management system designed to ensure immediate, face-to-face assessment of any emergency case, by a qualified Bradman Network clinician, with prompt implementation of treatment by the clinician(s) and/or inpatient facility.

Intake representatives will conduct a comprehensive benefits check and coordinate the initial appointment with the appropriate Network clinician at an office conveniently located near your work or home area. Intake staff also follows up to see that the appointment was kept and a treatment plan initiated.

Patients are matched with the appropriate Psychologist, Psychiatrist, Clinical Social Worker, Marriage and Family Therapist or Mental Health Counselor who perform comprehensive assessments and evaluations. Certified Addiction Professionals are also available if substance abuse problems are indicated.

If you are currently in treatment with a provider that is not in our Network and wish to continue therapy, you or the provider must contact our Intake Department at 1-800-272-3626 for authorization.

## **EMPLOYEE ASSISTANCE PROGRAM**

The Employee Assistance Program (EAP) provides a variety of counseling and informational services. The EAP is available for problems not normally covered under the mental health provisions of the Group Health Plan, such as stress, weight loss, financial issues, family problems, smoking cessation, etc. It can also be used for information and referral if you need help determining how to tackle a personal or workplace problem. A supervisor may also refer an employee to the EAP if it appears personal issues are interfering with work performance. Basically, the EAP is a tool for you to use to regain equilibrium during a stressful period.

You and your family members are eligible for up to six (6) visits per contract year to an approved mental health provider, at no cost to you. There is no copayment for using the EAP. You do not need to be covered by your Group Health Plan to use the EAP. However, if you receive a mental health or substance abuse diagnosis and require formal treatment, you may access Group Health Plan benefits if you (or your dependents) are eligible. The goal is to receive early intervention before the issue becomes a more serious problem.

The Employee Assistance Program provides assessment, counseling, referral and monitoring of the following problems:

**Chemical Dependency, Alcoholism and Drug Abuse, Mental Health Issues:** depression, suicidal thinking, identity issues, stress, life stages transition, et cetera. **Medical Concerns:** health and rehabilitation issues, physical handicap. **Financial dilemmas:** budget planning, credit card abuse, bankruptcy, gambling. **Domestic difficulties:** family communication, parenting, separation, divorce, child counseling. **Legal Pressures:** divorce, personal liabilities, arrest, child custody. **Work Related Issues:** absenteeism, tardiness, work quality, excessive sick leave, employee relations. **Career Changes:** career development, transfer, promotion, layoff, termination.

**If the situation warrants formal psychiatric care, you will be referred for treatment outside these provisions.**

**EAP services will also include, when necessary, case management of patients undergoing psychiatric treatment as well as case management of patients with chronic mental illness. We will provide 24-hour telephone access, crisis intervention and information and referral. We will provide critical incident and trauma support.**

**The EAP complements the mental health provisions of the Group Health Plan. A condition with a formal diagnosis which requires formal treatment is specifically covered under the mental health provisions of the Group Health Plan (see Mental Health/Substance Abuse Program). In those instances, the EAP serves primarily as an assessment and referral mechanism. The referral involves the coverage aspect of the case and not the provider. The same provider may continue rendering formal mental health treatment after a referral is made out of the EAP benefit and into the mental health provisions of the Group Health Plan benefit. When a condition does not involve a formal diagnosis and treatment, then the EAP provides the only coverage.**

# MENTAL HEALTH/SUBSTANCE ABUSE PROGRAM

## Benefits Summary

All Medically or clinically necessary Mental Health and Substance Abuse services and conditions shall be covered for the period of evaluation, initial acute (short term) stabilization, case management and referral.

Covered services must be authorized by Bradman/UniPsych.

### Outpatient Services

- **In-Network\***  
32 visits per contract year  
\$10 copayment per office visit
- **Out-of-Network\***  
32 visits per contract year  
\$10 copayment per office visit

### Inpatient Services

- **In-Network\***  
31 days per contract year  
\$100 copayment per admission
- **Out-of-Network\***  
31 days per contract year  
\$100 copayment per admission  
Emergency coverage only

\*Benefit maximums and fee schedules are coordinated between In-Network and Out-of-Network usage. In some cases, out-of-Network professionals and/or facilities may balance-bill non-covered services/ charges.

## Service Area

The service area is the State of Florida. Services are available to Eligible Employees and Dependents in this Service Area except when otherwise pre-authorized under the limited emergency Out-of-Network benefit.

## Benefits Description

Outpatient therapy is covered at 100% up to a maximum of 32 visits per contract year. In-Network and Out-of-Network visits and fees are coordinated. A copayment is to be made by Eligible Employees and Dependents, at the time of each service, in the amount of \$10. Treatment shall be rendered only by authorized providers. Authorized Out-of-Network outpatient services are paid at Network fee schedule.

Authorized inpatient care and the associated services of psychiatrists and other mental health professionals are covered 100% up to a limit of 31 days per contract year with a copayment to be made by Eligible Employees and Dependents, at the time of admission, in the amount of \$100 per admission. Treatment shall be rendered only by authorized facilities. Authorized Out-of-Network inpatient services are paid at Network fee schedule.

**The Mental Health and Substance Abuse benefits that are listed below shall be considered covered services when provided by a participating provider and/or pre-authorized by Bradman/UniPsych Companies.**

- 1) Inpatient hospital treatment includes covered services provided in a psychiatric facility, a psychiatric unit of a general hospital or a community-based crisis stabilization unit licensed by the state. Inpatient hospital care for mental disorders must be ordered in the treatment plan by the treating health care provider and is available only when less restrictive services are determined to be ineffective or inappropriate and inpatient treatment is designed to facilitate early return to a less restrictive alternate form of care.**
  
- 2) Outpatient treatment includes screening, assessment, crisis management services, medication management, psychotherapy, counseling and collateral therapy, partial hospitalization and intensive outpatient programs. Services must be ordered in the treatment plan by the treating health care provider to avoid the need for or as an alternative to treatment in inpatient settings or to facilitate earlier return to the community of individuals receiving inpatient care; to restore the functioning of individuals with mental disorders; or assist individuals to develop skills and access the supports needed to achieve their maximum level of functioning within the community. These categories include a wide range of treatment services provided in the covered person's own community including:**
  - a) Diagnosis, Evaluation and Assessment: both to determine eligibility and to develop a plan of treatment.**
  
  - b) Crisis Management Services: which are a range of services to support and stabilize a person who is undergoing a crisis because of mental illness.**
  
  - c) Medication Management: consisting of brief visits to a psychiatrist often for prescribing, dispensing and monitoring psychotropic medication and assisting consumers in managing their symptoms.**
  
  - d) Psychotherapy: counseling sessions on an individual, family or group basis, provided in an office, clinic or other community location.**
  
  - e) Partial Hospitalization: an intensive program provided in a structured setting for part of a day but not overnight. The program can include individual, group and family therapy, medication, expressive and activity therapies, case management, skill development and educational services.**

- f) Intensive Outpatient Program: provides a range of services after school, evenings and weekends in a variety of settings, including mental health centers, hospitals or free standing substance abuse programs.**

**Benefits are managed to ensure that each patient receives the most appropriate, customized care. This may include coverage for different modalities in the spectrum of care.**

### **3) Acute Substance Abuse Services:**

- a) Inpatient hospital services are covered in an acute care general hospital, substance abuse facility or acute inpatient detoxification program licensed by the state. Detoxification that requires management on a medical unit is not a covered benefit under the program. Refer to the handbook from medical/surgical coverage.**
- b) Outpatient treatment includes evaluation, acute initial stabilization, case management and referral. Outpatient services may be provided across a wide spectrum of different levels of care such as partial hospitalization, intensive outpatient programs, aftercare groups and outpatient individual psychotherapy.**
- c) Outpatient treatment includes diagnosis, evaluation and assessment, individual and group counseling and ambulatory detoxification.**

**The care provider must recommend treatment, working within the scope of his/her license. The various inpatient and intensive outpatient treatment modalities are available to facilitate an earlier return to the community, to restore functioning of individuals with addiction to substances and to assist individuals in developing skills and accessing the supports needed to achieve their maximum level of functioning.**

## **EXCLUSIONS OR LIMITATIONS**

All medically or clinically necessary Mental Health and Substance Abuse services and conditions shall be covered only for the period of evaluation, initial acute (short term) stabilization, case management and referral. The following specific conditions or treatments are excluded, or limited, and may require coordination of benefits:

- 1. Treatments rendered or conditions covered under the auspices or funding of any governmental program.**
- 2. Post-acute care for a formal psychiatric disability which is covered under another Medical Disability benefit.**
- 3. A chronic condition requiring non-acute, maintenance, custodial, assisted living, long-term residential or institutional care.**
- 4. A neurological condition or treatment or a permanent organic brain syndrome.**
- 5. Relationship, family, marriage, or divorce counseling when such services extend beyond the period necessary for crisis intervention and short-term evaluation.**
- 6. Psychiatric or psychological examinations, testing or treatments for any of the following:**
  - a. Pre- and post-operative procedures and evaluations.**
  - b. Services sought for the purposes of obtaining or maintaining employment or insurance coverage.**
  - c. Services sought in connection with, or in regard to, Judicial or Administrative proceeding.**
  - d. Services sought pursuant to a Court Order or as a condition of parole or probation.**
  - e. Treatment of a sex offender.**
- 7. Sex therapy will only be covered when it is an adjunct to therapy for other mental health conditions, for which benefits are afforded under the Group Health Plan.**
- 8. Inpatient services for detoxification more than two times in any one calendar year for the removal of toxic substances from the system.**
- 9. Educational, vocational or telephone counseling, testing or materials, remedial education, learning disabilities, speech therapy, behavioral training, hearing therapy.**

10. **Attention Deficit Hyperactivity Disorder and therapy when services are provided by a non-psychiatric physician.**
11. **Diet counseling, weight control therapy, or nutritional counseling. Treatment for smoking cessation.**
12. **Psychotherapy or other mental health intervention for pain or other medical conditions.**

## **ELIGIBILITY**

**An Eligible Employee or Dependent is any person who has been authorized by your employer to receive services and whose authorization to receive services has been communicated to Bradman/UniPsych by your employer in the manner required in the Agreement between Bradman/UniPsych and your employer.**

## **MIXED SERVICES**

**Eligible Employees or Dependents requiring both medical and mental health treatment are advised that Bradman/UniPsych is responsible for only those services and supplies associated with the treatment of mental and substance abuse conditions. Bradman/UniPsych shall not be responsible for the cost of any medical or surgical services that are provided concurrently or in conjunction with the treatment of mental or substance abuse conditions pursuant to our Agreement with your employer, whether or not Bradman/UniPsych makes referrals or recommendations for such medical or surgical services. These include but are not limited to all services and supplies relating to neurological conditions and all ancillary services and supplies relating to medical conditions. All determinations as to whether services rendered are primarily for mental or substance abuse conditions or, in the alternative, for medical conditions, shall be determined as outlined in the Master Agreement provided to your Human Resource Department. For medical coverage information, please contact the Group Health Plan Administrator at the phone number on your Group Health Plan ID card.**

## **EMERGENCY ROOM**

**If Eligible Employees or Dependents are referred or self-refer to an Emergency Room, the cost of the emergency room evaluation shall not be the responsibility of Bradman/UniPsych. If a psychiatric consultation is requested, Bradman/UniPsych shall pay for the cost of the psychiatric assessment and/or treatment. Bradman/UniPsych shall not be responsible for the cost of ambulance transfers. For emergency room coverage information, contact the Group Health Plan administrator at the phone number on your Group Health Plan ID card.**

## **GRIEVANCE PROCEDURE**

**Any member who has a complaint with respect to administrative and/or clinical services rendered will be encouraged to contact our Grievance Coordinator. The Grievance Coordinator will collect all of the pertinent data from the member, in writing, and will then be responsible to fully research the complaint and determine an appropriate resolution within a maximum of fifteen (15) working days. The Grievance Coordinator is available, during normal working hours, at 1-800-272-3626 or by writing to the Corporate Office address.**

**In the event that the proposed resolution issued under the grievance procedure is not acceptable to the member, he or she may present the problem, in writing, to the attention of the Clinical Director if the complaint concerns clinical services rendered to the member and/or an enrolled dependent. The Clinical Director will then further evaluate the complaint, obtain clinical information from the clinician involved and contact the member within fifteen (15) working days of receipt of the complaint. The Clinical Director will then recommend an appropriate resolution to the complaint.**

**In the event that the Clinical Director's decision is unacceptable to the member, the matter will be referred to the Grievance Review Sub-Committee of the Quality Assurance Committee which will render its decision within fifteen (15) working days of its receipt of the complaint.**

**In the event that the decision rendered by the Grievance Review Sub-Committee is unacceptable to the member, the matter will be considered by the President which will render a final decision within fifteen (15) working days of its receipt of the complaint.**

**All problems and grievances will be documented. If it is necessary for the member to attend a meeting, it will be held within the Service Area, either at a Central Office or at a location which is reasonably convenient to the member and which is mutually agreeable to both parties.**

**The Bradman/UniPsych Companies will always render written decisions regarding any grievance or complaint. The written document will include the basis for the decision and the mechanics for further appeal.**

## **CONCLUSION**

**Our goal at Bradman/UniPsych is to provide you and your family with high quality, clinically appropriate, cost-effective care. Your health and recovery are our primary objective. If you have any questions or need additional information, please call us at 1-800-272-3626 (1-800-BRADMAN).**