Mental Health Roadmap – Your guide to navigating mental health services

Wisconsin Women's Health Foundation

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EMERGENCY & CRISIS INFORMATION

Is this a mental health crisis? Please seek help immediately.

Emergency Medical Services—911

If the situation is potentially life-threatening, get immediate emergency assistance by calling 911, available 24 hours a day.

Visit the nearest Emergency Department

National Suicide Prevention Lifeline, 1-800-273-TALK (8255)

If you or someone you know is suicidal or in emotional distress, contact the National Suicide Prevention Lifeline. Trained crisis workers are available to talk 24 hours a day, 7 days a week. Your confidential and toll-free call goes to the nearest crisis center in the Lifeline national network. These centers provide crisis counseling and mental health referrals.

HOW TO USE THIS GUIDE

Mental health is an important part of overall health, and sometimes we need help managing it. It's OK to need help, but sometimes, knowing where to start can be a challenge – especially when you're trying to figure out what is and isn't covered by your health insurance! This guide was created to help you navigate the process. Use it to help you understand your coverage and to ultimately get the mental health services you desire.

This guide includes tips to:

1. Understand your mental health
2. Learn about your health insurance
3. Find a behavioral health provider
4. Make an appointment and prepare for it
5. Next Steps

1. UNDERSTAND YOUR MENTAL HEALTH

Mental health includes your emotional, psychological and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important.

A *mental health disorder* is a diagnosed change in thinking, mood, and/or behavior. Mental health disorders are common. In fact, 1 in 5 adults living in the United States have a mental health disorder. Many factors contribute to mental health disorders, including genes and life experiences.

Unsure if you or someone you know is living with a mental health disorder?
Screenings can help find a disorder and lead you to treatment before the condition gets worse. Below are feelings and behaviors we all experience, but having one or more over a long period of time could be a warning sign:

- ☐ Eating or sleeping too much or too little
- ☐ Pulling away from people and usual activities
- ☐ Having low or no energy
- ☐ Feeling numb or like nothing matters
- ☐ Having unexplained aches and pains
- ☐ Feeling helpless or hopeless
- ☐ Smoking, drinking, or using drugs more than usual
- ☐ Feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared
- ☐ Yelling or fighting with family and friends
- ☐ Experiencing severe mood swings that cause problems in relationships
- ☐ Having persistent thoughts and memories you can't get out of your head
- ☐ Hearing voices or believing things that are not true
- ☐ Thinking of harming yourself or others
- ☐ Inability to perform daily tasks like taking care of your kids or getting to work or school

For more on screening and specific mental health disorders, visit:
https://screening.mentalhealthamerica.net/screening-tools

What can I do if I think I need mental health services for myself or family members?

Remember: mental health disorders are common… and treatable! Many people with mental health problems can get better, and many recover! completely. There is no shame in seeking help.

Once a mental health disorder is diagnosed, there are different kinds of therapies available, including medication, counseling, or a combination of the two. Complementary and alternative treatments (art, dance, music, hypnotherapy, etc.), self-help, and peer support are also available. A health professional will determine which therapy is likely to be the most effective.

If you think you or a family member may need mental health services, consider making an appointment with your primary care provider (PCP). Your PCP knows you and your health best. Many physical illnesses can cause symptoms similar to mental illness. This type of professional can perform a physical exam and help you rule out certain conditions.

2. LEARN ABOUT YOUR HEALTH INSURANCE

Uninsured? Learn more about how you, your friends, and your family can obtain health insurance coverage provided by Medicaid or CHIP or the Health Insurance Marketplaces by visiting HealthCare.gov

Health insurance helps pay for health care services like office visits, counseling and prescription medications. Health insurance helps protect you financially if something unexpected happens, but it also helps you pay for services to keep you healthy and deal with new or ongoing health conditions.

Most health plans are required to cover certain health benefits. This includes mental health services. Most health plans generally cover the following mental health services:

- Inpatient services like a hospital or emergency room visit
- Access to behavioral health providers like psychiatrists, psychologists, advanced practice registered nurses, and counselors
- Treatments like psychotherapy, counseling, and medication

Many health plans also have "parity," which means they are required to provide equal coverage for both mental health and physical health when it comes to certain treatment limits and payment amounts. Learn more at: https://www.apa.org/helpcenter/parity-law-resources

How do I find out which mental health services are covered by my insurance?
We recommend you look at your plan's enrollment materials or any other information you have on the plan to see what the coverage levels are for all benefits. When in doubt, call the number on the back of your insurance card and speak with a representative for details about your plan and mental health benefits.

Does Medicaid cover mental health disorder services?
All state Medicaid programs provide some mental health services. These services often include counseling, therapy, and medication management. For additional information on Medicaid and mental health disorder services: visit https://www.medicaid.gov/medicaid/benefits/bhs/index.html.

Does Medicare cover mental health disorder services?
Medicare covers a wide range of mental health service:

- **Medicare Part A (Hospital Insurance)** covers inpatient mental health care services you get in a hospital. Part A covers your room, meals, nursing care, and other related services and supplies.
- **Medicare Part B (Medical Insurance)** helps cover mental health services that you would generally get outside of a hospital, including visits with a psychiatrist or other doctor, visits with a clinical psychologist or clinical social worker, and lab tests ordered by your doctor.
- **Medicare Part D (Prescription Drug)** helps cover drugs you may need to treat a mental health condition. Each Part D plan has its own list of covered drugs, known as formulary. Learn more about which plans cover various drugs.

- **If you get your Medicare benefits through a Medicare Advantage Plan (like an HMO or PPO)** or other Medicare health plan, check your plan's membership materials or call the plan for details about how to get your mental health benefits.
- **If you get your Medicare benefits through traditional Medicare (not a Medicare Advantage plan)** and want more information, call 1-800-MEDICARE (1-800-633-4227)

3. FIND A BEHAVIORAL HEALTH PROVIDER

After finding out which mental health services are covered by your plan, it's time to find a provider. This often can be done in the same conversation with your insurer as in Step 2: Learn About Your Health Insurance.

Questions to ask your health insurance:

Can I make a direct appointment with a psychiatrist or other mental health specialist, or do I need a referral from my primary care provider first?

How does my plan cover mental health visits?

Which services require preauthorization?

Which providers are in network?

I have a specific condition or need (eating disorder, veteran, mobility challenges, etc.). Which providers can accommodate me?

Who can provide mental health services?

- Along with screening for mental health concerns, a **primary care provider** (doctor, nurse practitioner, or other healthcare provider) can treat many mental health problems. They can also recommend or refer you to a specialized provider for your mental health needs.
- A **psychiatrist** is specially trained to assess, diagnose, and provide therapy for mental health conditions. They can also prescribe medications if needed. They work in hospitals, community mental health clinics, primary care clinics, and private practices.
- **Clinical Psychologists** make diagnoses and provide counseling and therapy. Sometimes they can prescribe medications.
- There are also **therapists and counselors** (whose titles vary from organization to organization), who can help with emotions, behaviors, and thinking patterns. They help with improving life skills, coping, and relationships.

How do I find the right provider?

Call your insurance company or state Medicaid program, look at their website, or check your member handbook to find behavioral health providers in your network. Family, friends, your employer, faith community, or other people in your community can also be helpful to provide suggestions for providers and services.

Get the phone numbers for professionals in your area **who accept your insurance plan**. Try to get at least three names and numbers, just in case.

TIP: In Well Badger, try searching the following keywords:

"Mental Health Outpatient Counseling," "AODA," "Case Management Services," "Community Support Program," "Comprehensive Community Services"

4. MAKE AN APPOINTMENT & PREPARE FOR IT

Now that you have the names and numbers of providers, you can make an appointment. If you find you're reluctant to call, ask a friend or family member to call for you. If it's your first time seeking a diagnosis, tell the person on the phone so they can block out enough time for a good conversation. If you're told new patients have to wait many months for an appointment, it would be wise to make an appointment anyway. Then call the second and third numbers on your list. You can always cancel your first appointment if you find someone who can help you sooner.

What questions should I ask when I call to make an appointment?

- Are you accepting new patients?
- Do you accept my insurance? (it's smart to double-check, even if your insurer has already told you this information) If you need to provide your Member ID and/or group number, this can be found on your insurance card.
- What mental health conditions does the provider treat?
- How soon can I get an appointment?
- If I have a special need, is the office able to accommodate me?

I've made my appointment. Now what?

Now that you've made an appointment, it's time to prepare for it. Here are things you should take to your appointment:

- Insurance card
- Valid photo ID
- Any health history or medical record for yourself and family members
- List of allergies
- Any medications, vitamins, or herbs you take (names, who prescribed them, and how much you take each day)
- **List of other providers you see**
- Questions and concerns you want to talk through with your provider
    - Examples: List of symptoms you've been experiencing, for how long, and how they're impacting your life.
    - Have you worked with people similar to me? For how long?
    - How will we work together to establish goals and evaluate progress?
    - What can I expect if we work together? How often will we meet and how hard will it be to get an appointment? Can I call you on the phone or e-mail between appointments?
    - What kind of improvements can I expect to see?
- Payment for a copayment, if you have one

Be sure to update your PCP about any mental health care you are receiving. When all members of your healthcare team can talk, it makes for better quality of care!

5. NEXT STEPS

Your health and well-being are important and personal. Following your appointment, you should feel you can work with, trust, and be comfortable talking to your mental health provider. It is also important to share in decision-making about your treatment. Make sure you are comfortable with the treatment plan and how it fits your needs. Talk about any concerns and questions you may have.

After your first visit, think about:

- Did you feel listened to?
- Did your provider use words you could understand? Pay attention to you? Speak in a way that made you feel comfortable and respected?
- Did your provider clearly explain your treatment options and their benefits and risks? Did you talk about a treatment plan? Did you feel that you shared in this decision?
- If you were given a prescription, did your provider tell you when to take it and how much?
- Do you have a follow-up plan?
- Can you contact your provider or staff with questions?

If you answered "yes" to most of these questions, you may have found a provider that's right for you!

If you answered "no" to any of these questions, remember that trust is built over time through repeat appointments and open communication. However, you are also your own advocate. Consider calling the office and sharing your concerns. They may be easily fixed, or you may be able to see another provider. It's OK to ask for changes or to look for another provider. Remember, you're recruiting team members who can help you with your treatment long-term.

I want to change my behavioral health provider. How can I do that?

If you want to change behavioral health providers, go back to Step 3 (Find a Behavioral Health Provider) to find someone you can work with and trust.

I'd like to keep working with this provider. What are my next steps?

If you feel this is the person who can help you with your healthcare needs,

1. Schedule any follow-up appointments. Routine appointments that fit your schedule can help build a trusted partnership with your provider.
2. Follow the treatment plan that you and your provider agree on.
3. Read your Explanation of Benefits (EOB). An EOB is a summary of health care charges that your insurance company sends after you see a provider or get a service. It is not a bill – it is a record of your services, and how much your provider is charging your insurance company.
4. Be sure you are covered with the right plan. Plans and your health needs can change. Review your coverage options during each Open Enrollment to make sure you plan meets your needs.
5. Tell your provider if your behavior or thoughts change. If you take medication, keep taking it as prescribed, even if you feel better. Talk to your provider about side effects or other concerns before you choose to stop taking your medication. You may need to change medications to find the one that works for you.

GUIDE SUMMARY

Sometimes we need help managing our mental health, and that's OK! But it can be a challenge to know where to start. We hope this guide helped you navigate and find someone whom you trust and feel comfortable working with. Use the following To-Do List to keep track of your navigation steps:

MY TO-DO LIST

Understand your mental health

- ☐ Take a mental health screening (https://screening.mentalhealthamerica.net/screening-tools)
- ☐ Consider visiting your primary care provider to rule out other illnesses

Learn about your health insurance

- ☐ Apply for health insurance (if applicable) (https://www.healthcare.gov/)
- ☐ Look at plan's enrollment materials for mental health benefits

Find a behavioral health provider

- ☐ Obtain referrals of in network providers from your insurance and/or consult with family/friends
- ☐ Choose a behavioral health provider

Make an appointment & prepare for it

- ☐ Make appointment
- ☐ Collect items needed for your appointment
- ☐ Make list of questions and concerns for provider

Next Steps

- ☐ Decide if this is the right provider for you
- ☐ Make follow-up appointment
- ☐ Follow plan developed by you and your provider
- ☐ Monitor any side effects or other concerns, and talk to your provider about them