

Welfare Fund

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February 22, 2019

Dear Member and Participant,

Beginning March 1, 2019 your Behavioral Health Benefits will be through **Optum Behavioral Health** instead of Aetna Behavioral Health. If you or your eligible dependent(s) are currently utilizing the behavioral health benefits, below is a guide to help you during this transition from Aetna to Optum. We have also enclosed a list of Frequently Asked Questions for your reference.

Outpatient Treatment

Let your current mental health provider know that your mental health insurance coverage is changing from Aetna to Optum on March 1, 2019. To find out if your provider is part of the Optum network, go to www.liveandworkwell.com, type in the access code **laborers** and look in the online directory.

- If your provider is part of the Optum network, you do not need to do anything except advise your provider that your coverage is changing to Optum as of March 1, 2019 and present your new ID card. Your treatment will continue as usual.
- If your provider is **not** part of the Optum network, you need to call the Benefit Office to access your transition of care benefit. If you are currently in outpatient treatment with Aetna using your in-network benefit you are eligible for a **transition of care benefit**. The transition of care benefit allows you to continue treatment with your current provider at the in-network benefit level until May 31st, 2019. If your treatment continues past May 31st, 2019, you will need to switch to an Optum network provider to continue to receive network level benefits, or your benefits will be paid at the out-of-network benefit level. **Call the Laborers' Benefit Office as soon as possible after March 1, 2019 at 800-489-0228 ext 2. and ask to activate your transition of care benefit.**

Inpatient and Intermediate Treatment

If you are in treatment at any level of care higher than standard outpatient treatment on March 1, 2019, your care will continue to be managed by Aetna until there is a step down to a lower level of care. Optum, Aetna and your treatment facility will work together to ensure a smooth transition and you do not need to call to access this service.

As always, if you have any questions, please call the Benefit Office to speak with a Benefit Specialist at 800-489-0228 ext. 2 or email us at benefits@stlaborers.com.

Sincerely,
Diana Marburger
Welfare Director

Frequently Asked Questions and Answers

What if I or one of my dependents is in inpatient or residential treatment on March 1, 2019?

If you or your eligible dependents are currently receiving inpatient hospital or residential treatment on March 1, 2019, your care will continue to be covered under the Aetna plan benefits until the date you are discharged or transitioned to a less intensive level of care. Aetna and Optum clinicians will manage this transition.

How do I find out if my provider is in the Optum network?

To find out if your provider is in the network, check www.liveandworkwell.com and enter the access code **LABORERS** to search the provider network. Access code is not case sensitive.

What action do I need to take if my Outpatient provider is in the Optum network?

You should alert your provider that your insurance coverage will be administered by Optum as of March 1, 2019 and your treatment will continue as normal.

What action do I need to take if my Outpatient provider is not in the Optum network?

If your provider is not contracted with Optum and your care continues beyond March 1, 2019, **you must call the Benefit Office to access your transition of care benefit.** You will be allowed to stay with your current licensed provider until May 31st, 2019 if your treatment **began prior** to March 1st, 2019. During this period, your claims will be paid at the in-network benefit level. Your cost will be limited to your in-network coverage; this is called your “transition of care” benefit.

Call the Laborers’ Benefit Office 800-489-0228 ext. 2 to request “transition of care” benefits and to certify your care. You should call as soon as possible after March 1, 2019 to avoid claims issues.

Once Optum is notified that you want to use your “transition of care” benefits, your record will be updated so that you may continue to be treated by your licensed non-contracted provider through May 31st, 2019.

What happens if I don’t transition my benefits?

If you do not request “transition of care” benefits through Optum, your outpatient therapy visits will be paid using the non-network benefit level, starting March 1, 2019.

What if my Outpatient treatment continues past the May 31st, 2019 date?

If your treatment continues past May 31st, 2019, and your provider is not in the Optum network, you will need to change your provider to an Optum network provider to continue to receive in-network benefits. Optum will assist you in finding a new provider. In rare cases, the transition of care may be extended if clinically necessary, and each case is reviewed on a case by case basis.