

# Mental Health Resources for Small Businesses

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## Employee Guide

“When I say ‘having survived,’ I mean it. Finding your way, struggling, and hanging in there...”

- CBS News Correspondent Mike Wallace, discussing his battle with depression

- ◆ At any given time, 30 percent of the U.S. population has a mental illness.
- ◆ Whether personally, through friends, family, or co-workers, almost everyone has encountered the suffering that accompanies mental illness.

This resource guide has been created to help you, as an employee, a co-worker, parent, family member, or friend, to learn more about your company’s mental health resources and benefits, as well as other resources and programs throughout New York City and New York State.

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### WHAT YOU NEED TO KNOW ABOUT MENTAL ILLNESS

Mental illnesses are biologically based brain disorders that affect persons of any gender, age, race, or religion. They cannot be overcome through “will power” and are not related to a person’s character, intelligence, or upbringing.

#### Left untreated...

Mental illness may become more severe over time.

Depressed individuals are more likely to suffer from costly chronic conditions, such as asthma, diabetes, and cardiovascular disease, and to experience a more difficult recovery from these conditions.

The consequences for individuals, families, and society are staggering, including unemployment, substance abuse, homelessness, incarceration, suicide, and lost productivity.

#### Mental illnesses are treatable...

Approximately 80 percent of individuals experience a significant reduction of symptoms and improved quality of life with a combination of pharmacological treatment, therapy, and community support.

There are numerous resources for individuals and their loved ones living with mental illness. The first step is to become informed about diagnoses, treatment, and access to quality mental health and support services.

## QUESTIONS TO ASK YOUR EMPLOYER ABOUT YOUR HEALTH BENEFITS

- ◆ Does my insurance include mental health benefits?
- ◆ Is the company health insurance plan an HMO or PPO? (see definitions on page 6)
- ◆ How many outpatient visits or inpatient days will my insurance cover?
- ◆ Does the insurance plan have an out-of-network/non preferred provider benefit?
- ◆ What is the deductible and/or co-payment per outpatient visit or inpatient day?
- ◆ Do I need pre-authorization before utilizing any of these benefits?
- ◆ Does the company have an employee assistance program (EAP)?
- ◆ Does the EAP offer short term counseling? If so, how many sessions are covered?
- ◆ Does the EAP offer referrals to mental health professionals?
- ◆ Does the EAP provide services for my spouse and/or children?

“There are so many people who, either with themselves or in their families, have to deal with depression. To be able to help someone else helps you, and there is the joy of being able to say, ‘Hey, I know about it. Look at me. I came through it.’”

- CSB News Correspondent Mike Wallace

## MENTAL HEALTH SERVICE PROVIDERS WHAT CAN YOUR DOCTOR OR THERAPIST DO FOR YOU?

	Serves as a Primary Care Practitioner (PCP)	Provides Referrals to Mental Health Specialists	Provides Psychotherapy	Prescribes Psychiatric Medications	Provides Medication Management
Primary Care Physician (PCP)	•	•		•	•
Nurse Practitioner (NP)	•	•		•	•
Licensed Clinical Social Worker (LCSW)		•	•		
Psychologist		•	•		
Psychiatrist		•	•	•	•

# TIMOTHY'S LAW: NEW YORK STATE'S MENTAL HEALTH PARITY LAW

## Part I: Base Benefit

*(mandatory for all fully insured companies)*

All fully insured businesses must provide employees a minimum of 20 outpatient visits and 30 inpatient days per year. Co-payments, co-insurance, and deductible rates for mental health services must not exceed those for any other outpatient and inpatient medical services covered under the insurance plan. This benefit also applies to spouses and/or dependent children who are part of the insurance plan.

### WHAT IS MENTAL HEALTH PARITY?

Mental health parity is defined as coverage for mental health services that is equal to the health plan medical coverage in terms of visits, days, deductibles, co-payments, and other cost-sharing mechanisms.

## Part II: Expanded Benefit

*(mandatory for companies with more than 50 employees)*

Businesses with more than 50 employees are required to provide full mental health parity for biologically based mental illnesses (defined as schizophrenia/psychotic disorders, major depression, bipolar disorder, delusional disorders, panic disorder, obsessive compulsive disorders, anorexia, and bulimia). In addition, they must provide coverage for children with serious emotional disturbances.

## Who Is Exempt From Timothy's Law?

Timothy's Law is not applicable to self-insured companies due to an exemption through the Employee Retirement Income Security Act (ERISA), individually purchased plans, Healthy NY, Family Health Plus, and Child Health Plus.

For more information, visit the Timothy's Law Campaign website:  
<http://timothyslaw.org>.

# MENTAL HEALTH BENEFITS TERMINOLOGY

**In-Network/Preferred Provider:** A group of providers that belong to a health plan. Insured individuals usually pay less when using an in-network provider.

**Out-of-Network/Non-Preferred Provider:** Providers who are not part of a specified insurance plan. Services received by out-of-network providers tend to increase an individual's out-of-pocket costs.

**Deductible:** The amount of money the insured individual must pay each year to cover any medical expenses before the health insurance policy starts paying.

**Co-payment/Co-insurance:** A specified amount of the total bill that an insured individual must pay at the time the service is rendered.

**Pre-authorization:** The insured individual must contact the health insurance company prior to obtaining a particular service to receive authorization for the service.

**HMO (Health Maintenance Organization):** A health plan that provides a full range of health care services to its members. Members of an HMO must typically receive all of their medical care from providers in the HMO network, coordinated by a primary care physician.

**PPO (Preferred Provider Organization):** A pre-paid health plan in which a monthly premium is required, after which the PPO covers any medical services. The insured individual can visit any provider from a list of providers without a referral from their PCP.

## WHAT EVERY EMPLOYEE SHOULD KNOW ABOUT THE AMERICANS WITH DISABILITIES ACT OF 1990

- ◆ The ADA requires businesses with at least 15 employees to provide reasonable accommodations for workers with disabilities to enable them to perform occupational tasks.
- ◆ Reasonable accommodations include modifying work schedules to facilitate access to treatment, granting employees the opportunity to work from home, restructuring facilities to enhance physical access, and providing necessary readers or interpreters.
- ◆ A disability is defined as a physical or mental impairment that limits one or more major life activity, such as walking, standing, reading, and lifting.
- ◆ When a requested accommodation poses an undue hardship on the employer, the employer must offer an alternative.

For more information, visit the U.S. Department of Justice ADA website:  
<http://ada.gov>.

## ABOUT NAMI-NYC METRO

The National Alliance on Mental Illness of New York City Metro, Inc. (NAMI-NYC Metro) is a grassroots organization that provides support, education, and advocacy for families and individuals of all ethnic and socio-economic backgrounds who live with mental illness. As one of the largest affiliates of the National Alliance on Mental Illness, we work collaboratively with our state and national affiliates and other stakeholders in the community to educate the public, advocate for legislation, reduce stigma, and improve the mental health system.

## NAMI-NYC METRO RESOURCES

**Helpline: 1-212-684-3264 Hours: Mon-Thurs 12-7 pm, Fri 12-6 pm**

The NAMI-NYC Metro Helpline provides support, information, and referrals to community resources and to NAMI's own services. Information packets are mailed to individuals and family members who are looking for further information about support services, mental illnesses, medication, treatment, and community resources.

### INFORMATION ABOUT MENTAL ILLNESS NEW YORK SERVICES & RESOURCES

#### NAMI

National Office: <http://nami.org>  
NYC Office: <http://naminycmetro.org>

#### National Institute of Mental Health

<http://nimh.nih.gov>

#### American Psychiatric Association

<http://healthyminds.org>

#### U.S. Dept. of Health & Human Services - Substance Abuse & Mental Health Services

<http://samhsa.gov>

### MEDICATION RESOURCES

#### Free Medicine Foundation

1-573-996-3333  
<http://freemedicinefoundation.com>

#### Needy Meds

1-215-625-9609  
<http://needy meds.com>

**LifeNet** is a crisis, information, and referral service, open 24/7. It is provided as a free community service by the Mental Health Association of New York City and the New York City Dept. of Health and Mental Hygiene.

#### English LifeNet

1-800-LifeNet (1-800-543-3638)

#### Spanish LifeNet

1-877-Ayudese (1-877-298-3373)

#### Asian LifeNet

1-877-990-8585

#### NYC Dept. of Health & Mental Hygiene Office of Consumer Affairs

1-212-873-5393

#### NYS Advocates for the Disabled

1-800-522-4369

#### Derechos de los Pacientes Internos

1-800-210-6456

