



HMO & POS Small Group Behavioral Healthcare Rider # M12

This rider is an addendum to the Behavioral Healthcare section of your Atlantis Group Subscriber Certificate of Coverage ("Subscriber Contract") with Atlantis Health Plan, Inc. ("Atlantis"). Unless specifically changed by this rider, all terms and conditions of your Subscriber Contract apply.

3. Behavioral Healthcare

Coverage is available for the services of a physician, psychiatrist, psychologist or certified social worker in connection with the diagnosis and treatment of mental, nervous or emotional disorders and ailments. Treatment consists of evaluation and, crisis intervention, and Medically Necessary inpatient hospitalization.

Refer to the "**SUMMARY OF BENEFITS**" for coverage limitations and applicable co-payments.

Outpatient Mental Health

Covered services include outpatient treatment of mental, nervous or emotional disorders or ailments. Coverage is limited to twenty (20) visits per calendar year for treatment provided by a (i) a facility issued an operating certificate pursuant to Article 31 of the New York Mental Hygiene Law, (ii) a facility operated by the New York State Department of Mental Hygiene (iii) a licensed psychiatrist, psychologist or clinical social worker or (iv) a professional corporation or a university faculty practice corporation. Outpatient mental health services must be medically necessary and require prior authorization by Atlantis.

Inpatient Mental Health

Covered services include inpatient services for the treatment of mental, nervous or emotional disorders or ailments. Coverage is limited to thirty (30) days of active treatment per calendar year provided by a Provider that falls within the definition of a "hospital" under Section 1.03 of the New York Mental Hygiene Law. Partial hospitalization visits are covered at a ratio of two partial hospitalization visits equaling one inpatient day. Inpatient mental health services must be medically necessary and Pre-authorized by Atlantis.

Alcoholism and Substance Abuse

Coverage is also provided for the diagnosis and treatment of alcoholism and alcohol abuse and substance abuse and substance dependence. Services include inpatient detoxification and outpatient visits for rehabilitation.

Refer to the "**SUMMARY OF BENEFITS**" for coverage limitations and applicable co-payments.

Inpatient Detoxification

Coverage is limited to seven (7) days of active treatment per calendar year for detoxification services provided in a hospital or detoxification facility. Inpatient alcoholism and substance abuse services must be medically necessary and Pre-authorized by Atlantis.

Outpatient Alcoholism and Substance Abuse Services

Coverage is limited to sixty (60) visits per calendar year. Up to twenty (20) of the outpatient visits may be used by Members who are the family members of the person in need of treatment, even if the person in need of treatment has not received or is not receiving treatment for alcoholism or substance abuse. Coverage for family Members includes visits for remediation, through counseling and education, of the adverse effects on the physical and

mental health of family Members resulting from a close relationship with the covered person receiving or in need of treatment for alcoholism or substance abuse.

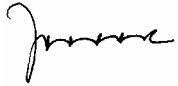
Inpatient rehabilitation services for alcohol or substance abuse are not covered *unless benefits have been added by a Rider to the Group Contract.*

All of the terms, conditions and limitations of your Atlantis Health Plan Group Subscriber Contract to which this rider is attached also apply to this Rider, except where specifically changed by this Rider.

Nothing in this rider shall be construed to prevent the medical management or utilization review of mental health benefits, including the use of prospective, concurrent or retrospective utilization review, preauthorization, and appropriateness criteria as to the level and intensity of treatment applicable to behavioral health.

Nothing in this rider shall be construed to prevent a policy from providing services through a network of participating providers who shall meet certain requirements for participation, including provider credentialing.

Atlantis Health Plan, Inc.



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