

**2023 Blue Cross and Blue Shield Service Benefit Plan - Standard and Basic Option**

**Section 5. Benefits**

**Section 5(e). Mental Health and Substance Use Disorder Benefits**

**Inpatient Hospital or Other Covered Facility**

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**Note: For Standard Option, we state whether or not the calendar year deductible applies for each benefit listed in this Section. There is no calendar year deductible under Basic Option.**

**Benefit Description**

**Inpatient Hospital or Other Covered Facility**

Inpatient services provided and billed by a hospital or other covered facility (See below for residential treatment center care.)

- Room and board, such as semiprivate or intensive accommodations, general nursing care, meals and special diets, and other hospital services
- Diagnostic tests

Note: Inpatient care to treat substance use disorder includes room and board and ancillary charges for confinements in a hospital/treatment facility for rehabilitative treatment of alcoholism or substance use disorder.

Note: You must get precertification of inpatient hospital stays; failure to do so will result in a \$500 penalty.

**Standard Option - You Pay**

Preferred facilities: \$350 per admission copayment for unlimited days (no deductible)

Member facilities: \$450 per admission copayment for unlimited days, plus 35% of the Plan allowance (no deductible)

Non-member facilities: 35% of the Plan allowance for unlimited days (no deductible), and any remaining balance after our payment

**Basic Option - You Pay**

Preferred facilities: \$250 per day copayment up to \$1,500 per admission for unlimited days

Member/Non-member facilities: You pay all charges