



Beginning January 1, 2007, PacificSource will be managing mental health and chemical dependency treatments consistent with the implementation of Oregon's new parity rules. We will apply utilization criteria and benefits for both mental health and chemical dependency in a manner similar to those applied to other medical benefits and treatment reviews. The following diagnoses and treatments are not covered under PacificSource policies for mental health and chemical dependency.

Mental Health

Non-covered Diagnoses under parity law

- Sexual and gender identity disorders in adults
- Paraphilias
- Specific delays in development and learning disorders
- Mental retardation
- V codes (See exceptions to these on the following page.)

Non-covered Treatments

- Mental retardation
- Learning disorders
- Paraphilias
- Gender identity in adults
- Educational/correctional services
- Sheltered living
- Court-ordered sex offender program
- Caffeine- and nicotine-related services
- Support groups
- Neurodevelopmental therapy
- Sensory integration training
- Hypnotherapy
- Equine/animal therapy
- Narcosynthesis
- Aversion therapy
- Social skills training
- Recreation therapy (except for therapy that is part of inpatient and residential treatment)
- Marriage/couples counseling
- Court-ordered screening and treatment
- Biofeedback (except to treat migraine headaches or urinary incontinence)

Chemical Dependency

Non-covered Treatments

- Court-mandated diversion
- Chemical dependency educational classes
- Programs to stop smoking
- Alcoholic Anonymous

This is not a guarantee of benefits. Benefits are subject to member and provider eligibility. Please contact PacificSource Customer Service at (888) 977-9299 for benefit and eligibility verification.



PacificSource HEALTH PLANS

Covered and Non-covered Diagnoses under Oregon Mental Health and Chemical Dependency Parity

The table below should be used as a guideline for covered and non-covered diagnoses for groups under the parity law. If the code set is listed as a range of codes, it includes all codes within that range.

Covered Mental Health

290
290.12 – 290.13
290.2 – 290.21
290.42 – 290.43
290.8 – 290.9
293.8 – 293.89
295 – 298.9
299.0 – 301.9
302.1 and 302.3
302.7 – 302.79
306 – 306.9
307 – 307.80
307.89 – 307.9
308 – 309.29
309.3 – 309.4
309.8 – 309.9
311 – 314.9
315.3 – 315.8
316

Covered Chemical Dependency

291
291.5 – 291.9
292 – 292.81
292.84 – 292.9
303
303.9
304 – 305.0
305.2 – 305.9

Covered only up to age 18

302.6
302.85
302.9

Non-Covered Diagnoses

302.2, 302.4, 302.5, and 302.6*
302.81 – 302.84
302.85* and 302.89
302.9*
315 – 315.2
315.9
317 – 319
V15.81 – V71.09*

**These are covered under the exceptions above*

Covered Medical

290.0 – 290.11
290.3 – 290.41
291.0 – 291.4
292.82 – 292.83
293 – 293.1
293.9
294 – 294.9
303
307.81
310 – 310.9

Covered only up to age 5

V61.20 – V61.21
V62.82

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