



Healthy Blue<sup>SM</sup>

BlueChoice<sup>®</sup> HealthPlan of SC

Healthy Connections



# Behavioral Health 101



# Disclaimer

Materials presented are not comprehensive. This training does not take the place of reading the provider policy and procedure manual. Prior to treatment, all beneficiaries must meet criteria for medical necessity for that service. All information in this presentation pertains to South Carolina Department of Healthy and Human Services (SCDHHS) Healthy Connections Medicaid beneficiaries.

# Topics

- Covered Behavioral Health Benefits and Providers
- Behavioral Health Programs
- Provider Resources
- Claim Filing Guidelines
- Grievances and Appeals
- Key Contacts

# Covered Behavioral Health Services and Providers

# Fee-For-Service Members

- The South Carolina Department of Health and Human Services (SCDHHS) is responsible for some behavioral health services.
- SCDHHS is responsible for waiver services.
- SCDHHS is an independent organization that offers health information you may find helpful.

# Healthy Blue Members

- Inpatient services provided in a general acute care hospital
- Professional psychiatrist services
- Outpatient services provided by licensed independent practitioners (LIPs), group practices, federally qualified health centers (FQHCs) and rural health clinics (RHCs) including psychiatrists and advanced nurse practitioners
- Substance abuse services provided by any of the Department of Alcohol and Other Drug Abuse Services (DAODAS) Commissions
- Autism services

# Healthy Blue Members (Continued)

- Psychiatric residential treatment facility (PRTF) services
- Rehabilitative behavioral health services (RBHS)
- Opioid Treatment Program (OTP)
- Institutes for Mental Disease (IMD)
- School-Based Rehabilitative Therapy Services, effective July 1, 2022

# School-Based Rehabilitative Therapy

- Effective July 1, 2022
- SCDHHS provides Medicaid reimbursement for medically necessary services provided to Medicaid-eligible individuals in the Local Education Agency (LEA).
- Medical necessity means the need for treatment is necessary to diagnose, treat, cure, or prevent an illness, or participation in services is reasonably expected to relieve pain, improve and preserve health, or be essential to life.
- This includes, but is not limited to, **children under the age of 21 years** who have or are at risk of developing sensory, emotional, behavioral or social impairments, physical disabilities, medical conditions, intellectual disabilities or related disabilities, or developmental disabilities or delays.



# School-Based Rehabilitative Therapy – Billing Modifiers

- Billing modifiers must match the credentials of individual rendering the service
- Modifiers for school-based mental health services include:

## ***H1- Licensed Clinician***

- Licensed clinician refers to licensed or certified professionals allowed to practice at the independent level. This includes: LPC, LMFT, LISW, LPES, Certified School Psychologist II and Certified School Psychologist III.

## ***H2- Unlicensed Clinician***

- Unlicensed clinician refers to those professionals who require supervision and co-signature on their Diagnostic Assessment (which is used to confirm medical necessity). This includes: LMSW, MHP, and Certified School Psychologist I.

# School-Based Rehabilitative Therapy – Staff Supervision

- Services provided by any LMSW, or unlicensed mental health professional must be clinically supervised by a Licensed Practitioner of Healing Arts (LPHA).
- Supervising licensed professionals must have a log documenting supervision of services by the LMSW or MHP.
- Supervision must occur at a minimum of every 30 days.

# Inpatient Behavioral Health

- Inpatient behavioral health services are only covered if provided by a contracted and credentialed general acute care hospital, an alcohol or drug commission (DAODAS), or a free-standing psychiatric facility (IMD).
- Diagnosis-related groups (DRGs) covered include:
  - DRG 424-433: psychiatric services
  - DRG 521-523: substance abuse services
- Prior authorization (PA) is required.

# Outpatient Behavioral Health

- Outpatient behavioral health services provided in solo and group practices or by an FQHC or RHC are covered.
- The following contracted and credentialed practitioners can provide BH services:
  - Psychiatrists
  - Psychologists
  - Master-level nurses
  - Licensed master social workers (LMSWs) under supervision of a contracted and credentialed physician, psychologist or independently licensed master's level BH provider
  - Independently licensed master level clinicians
  - Licensed Independent social workers (LISWs)
  - Licensed professional counselors (LPCs)
  - Licensed marriage and family therapists (LMFTs)
  - Licensed psychoeducational specialists (LPSs)
- LIPs may provide both mental health and substance abuse counseling services.

# Outpatient Behavioral Health – Prior Authorizations

- Participating behavioral health providers are not required to obtain prior authorization (PA) for most core therapy services.
- Psychological testing and assessments do require a PA.
- Effective Nov. 1, 2019, CPT® codes 90832, 90834 and 90837 require PA after 24 sessions or encounters have been billed in a 12-month period (July 1 – June 30).
  - This includes sessions that might be held with different providers.
- Providers should contact Behavioral Health Utilization Management with any questions related to PA guidelines.

# Outpatient Behavioral Health – PA (Cont...)

- When rendering services that require PA, providers are encouraged to fill out the Outpatient Treatment Request OTR Form.
- The OTR form should be submitted via fax to 877-664-1499 prior to the first non-authorized session.
- Providers will be notified of determination via letter.
- Psychological testing requests should be submitted on the Psychological Testing Request Form.
- To obtain request forms, visit [www.HealthyBlueSC.com](http://www.HealthyBlueSC.com) and select Providers.

# Covered Codes

- All Healthy Blue behavioral health providers are encouraged to review Section 4 of their respective manuals on the SCDHHS website for information on covered codes and limitations.
- Manuals include:
  - Autism Spectrum Disorder (ASD) Services Manual
  - Community Mental Health (CMH) Services Manual
  - Federally Qualified Health Center (FQHC) Behavioral Health Services Provider Manual
  - Local Education Agencies (LEA) Services Provider Manual, effective July 1, 2022
  - Licensed Independent Practitioners (LIP) Rehabilitative Services Manual
  - Psychiatric Hospital Services Manual
  - Rehabilitative Behavioral Health Services (RBHS) Manual

# Department of Alcohol and Other Drug Abuse Services

- All 33 Department of Alcohol and Other Drug Abuse Services (DAODAS) Commissions are contracted and credentialed with Healthy Blue.
- DAODAS services are based upon the American Society of Addiction Medicine (ASAM) levels of care.
- Managed Care Organizations review care based upon the ASAM medical necessity criteria.
- Medication-assisted treatment (MAT) services delivered at DAODAS are covered benefits.



# DAODAS Levels of Care

DAODAS commissions offer or refer to the following levels of care:

1. Residential detoxification
2. Social detoxification
3. Medically monitored inpatient detoxification
4. Residential treatment
5. Day treatment or partial hospitalization
6. Intensive outpatient program treatment
7. Outpatient treatment

# Rehabilitative Behavioral Health Services

- Effective July 1, 2016, Rehabilitative Behavioral Health Services (RBHS) were carved in.
- RBHS codes requiring PA include:
  - H2014: Behavior Modification
  - H2017: Psychosocial Rehabilitation Services
  - H2030: Psychosocial Rehabilitation Services/Community Intervention services
  - H2037: Therapeutic Childcare
  - S9482: Family Support Services

*Note: DAODAS Commissions are excluded from this PA update.*

- Effective Jan. 1, 2018, DMH facilities were excluded from PA requirements for RBHS services.

# RBHS (Continued)

- Providers of RBHS services include:
  - Department of Mental Health (DMH) (provide directly)
  - Department of Education (DOE) (provide directly)
  - Department of Juvenile Justice (DJJ) (refer many services to private RBHS providers)
  - Department of Social Services (DSS)
  - Continuum of Care (CoC) (refer many services to private RBHS providers)

# Psychiatric Residential Treatment Facility

- Psychiatric residential treatment facility (PRTF) services should be filed on a UB-04 Claim Form using revenue codes.
  - The revenue codes to be used by PRTF providers are 120, 124 and 154.
  - Therapeutic home time should be billed using revenue code 183. Note, there is a 14-day period in which the member can return home, but services can be billed by the PRTF.
  - To determine the number of therapeutic home time hours the member has accrued during their stay or if they have changed plans or PRTFs, email the SCDHHS BH division.
- Ancillary services should be filed on a CMS-1500 Claim Form using CPT codes.

# PRTF (Continued)

- Claims can be submitted electronically through a vendor.
  - Our electronic vendor number is 00403.
- Paper claims should be mailed to the following address:

Healthy Blue  
Attn: Claims  
P.O. Box 100124  
Columbia, SC 29202
- Claims can also be submitted via the Availity Portal at [www.availity.com](http://www.availity.com). Availity is an independent company that administers the secure provider portal on behalf of BlueChoice HealthPlan.

\* This link leads to a third-party website. That company is solely responsible for the privacy policies and content on its site

# Autism Spectrum Disorder

Providers of Autism Spectrum Disorder (ASD) services can include:

- Licensed psychologists
- Licensed psycho-educational specialists
- Licensed independent social workers — clinical practice
- Licensed marriage and family therapists
- Licensed professional counselors
- Board-certified behavior analysts (BCBA) (masters or doctoral)
- Board-certified assistant behavior analysts (BCaBA)

*Note: LIPs must fulfill all requirements for South Carolina licensure as outlined by the South Carolina Code of Laws and established and enforced by the South Carolina Department of Labor Licensing and Regulation.*

# ASD (Continued)

\*RBT must bill under a BCBA-D, BCBA or BCaBA.

## Treating new members:

- PA is needed for all new Healthy Connections members.
- In order to request PA, the following information should be faxed to 877-664-1499:
  - Diagnosis of Autism
  - Plan of Care
  - ASD Services Request Form
- To obtain a request form, visit [www.HealthyBlueSC.com](http://www.HealthyBlueSC.com) and select Providers.
- Please allow seven days for review and notice.

# Behavioral Health Programs



# Overview

Healthy Blue provides the following:

- Disease management programs:
  - Major depressive disorder
  - Adolescent major depressive disorder
  - Bipolar disease management
  - Schizophrenia
  - Substance use disorders
- Complex case management and PRTF case management
- Follow-up after hospitalization and care coordination service

# Behavioral Health Disease Management

- The Disease Management department provides education and support to members with identified behavioral health conditions.
- The Disease Management department also provides clinical and nonclinical health promotion including:
  - Clinical: weight management program, smoking cessation program, seasonal outreach, HEDIS® or quality improvement initiatives.
  - Non-clinical: member health education and newsletters 19.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

# Behavioral Health Case Management

Case management and intensive case management:

- Case management is available to members with behavioral health needs beyond the scope of the Disease Management programs.
- The clinical team reviews members as needed to develop treatment and care plans, develop community resources and engage the member in treatment.
- The behavioral health clinical team includes care managers (utilization management), case managers, outreach support specialists, the manager for behavioral health services and the behavioral health medical director.

# Behavioral Health Case Management (Continued)

## Follow-up after hospitalization:

Healthy Blue provides follow-up after hospitalization to:

- Ensure members continue their care in an outpatient setting after discharge.
- Ensure members are seen by a mental health provider within seven days of discharge from inpatient care.

## PRTF case management:

- PRTF case management supports members in PRTFs and assists with treatment plans and discharge planning.

# Provider Resources

# Available Resources

The following provider resources are available on [www.HealthyBlueSC.com](http://www.HealthyBlueSC.com):

- Clinical Practice Guidelines
- BH Outpatient Treatment Request Form
- BH Data Sharing Form
- Psychological Testing Request Form
- Provider Manual
- ASD Testing Authorization Form
- ASD Services Request Form
- PRTF PA Form
- RBHS BH Treatment Review and Authorization Request Form
- RBHS Progress Note Form
- Dispute forms

# Claims Filing Guidelines

# Claim Filing Guidelines

- When billing for covered behavioral health services rendered by LMSWs in an FQHC or RHC, claims must include the:
  - National Provider Identifier (NPI) number of the supervising provider (box 24J).
  - Place of service of either 11 or 50.
  - Procedure code accompanied by the U4 and HO modifier (box 24D).
- Behavioral health services rendered by an LIP or psychologist should be submitted with either the **AH** or **HO** modifier.
- It is important to bill with the NPI number registered with South Carolina, or your claim will not be paid.
- Your NPI number and tax identification number are required on all claims.



# Claim Filing Guidelines (Continued)

- Timely filing is 365 days.
- Coordination of Benefits claims must include third-party remittance advice and the third-party letter explaining denial or reimbursement.
- Paper claims should be mailed to the following address:  
Healthy Blue  
Attn: Medicaid Claims  
P.O. Box 100124  
Columbia, SC 29202-3124
- Claims can also be submitted via the Availity Portal at [Log in | Availity Learning Center \(learnupon.com\)](#).

# Grievances and Appeals

# Grievances and Appeals

- Grievances and appeals should be mailed to:  
Healthy Blue  
ATTN: Grievances and Appeals Department  
P.O. Box 62429  
Virginia Beach, VA 23466-2429
- To obtain forms, visit [Medicaid for South Carolina | Healthy Blue of South Carolina \(healthybluesc.com\)](https://www.healthybluesc.com) and select Providers.
- Grievance and appeals time frames:
  - Grievances: 30 calendar days from the time provider became aware of the issue.
  - Appeals: 30 calendar days from the Notice of Action Letter.
- For inquiries, contact the Customer Care Center by phone at 866-757-8286.

# Key Contacts

# Behavioral Health Contacts

## Customer Care Center:

- Phone: 866-757-8286

## Authorizations:


- Utilization Management
  - Phone: 866-902-1689, option 3
  - Fax line for Behavioral Health clinical information: 877-664-1499


## Cost Containment:


- Overpayment and Refunds
  - Phone: 818-234-3289


HEALTHY BLUE ♦ PO BOX 100317 ♦ COLUMBIA, SC ♦ 29202-3317

Customer Service: 866-781-5094 (TTY: 866-773-9634) Monday – Friday from 8 a.m. – 6 p.m.  
24-Hour Nurseline: 800-830-1525 (TTY: 711)

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