

# Behavioral Health Orientation

# Behavioral Health Standard Plan Services

Behavioral health (BH) Healthy Blue coverage	BH visit limits/prior authorization (PA) requirement
Inpatient BH services	PA requirements apply
Outpatient BH emergency room services	No PA requirements apply
Outpatient BH services provided by direct-enrolled providers	BH visit limits/PA requirements apply
Partial hospitalization	PA requirements apply
Mobile crisis management	PA requirements apply
Facility-based crisis services for children and adolescents	PA requirements apply
Professional treatment services in facility-based crisis program	BH visit limits/PA requirements apply
Outpatient opioid treatment	PA requirements apply
Ambulatory detoxification	BH visit limits/PA requirements apply

# Behavioral Health Standard Plan Services (cont.)

BH Healthy Blue coverage	BH visit limits/PA requirement
Research-based intensive BH treatment	BH visit limits/PA requirements apply
Diagnostic assessment	BH visit limits/PA requirements apply
EPSDT	PA requirements apply in some circumstances
Nonhospital medical detoxification	PA requirements apply
Medically supervised or alcohol and drug abuse treatment center detoxification crisis stabilization (ADATC)	PA requirements apply
Institution of Mental Disease (IMD)-ILOS: Mental Health and Substance Use Disorder (SUD)	PA required
Peer support	No PA required

# BH *Clinical Coverage Policies*

## **Mandatory *Clinical Coverage Policies***

*8A: Enhanced Mental Health and Substance Abuse Services* (limited to services listed):

- Mobile crisis management
- Diagnostic assessment
- Partial hospitalization
- Professional treatment services in facility-based crisis
- Ambulatory detoxification
- Nonhospital medical detoxification
- Medically supervised or ADATC detox crisis stabilization
- Outpatient opioid treatment



# BH Clinical Coverage Policies (cont.)

*8A-2: Facility-based Crisis Services for Children and Adolescents*

*8B: Inpatient Behavioral Health Services*

*8C: Outpatient Behavioral Health Services Provided by Direct-Enrolled Providers*

*8F: Research-Based Behavioral Health Treatment (RB-BHT) for Autism Spectrum Disorder (ASD)*

## **BH MCG Care Guidelines**

- *Peer Support*
- *Electroconvulsive Therapy*
- *Neuropsychological Testing*

# BH Level of Care Tools

In addition to the state *Medical Policies* and MCG Care Guidelines, providers are required to use the following level of care tools for medical necessity reviews:

Level of Care Utilization System (LOCUS) for mental health services for members 18 and older

Child and Adolescent Level of Care Utilization System (CALOCUS) for mental health services for children and adolescents 6 to 17 years old

American Society for Addiction Medicine (ASAM) for substance use services for all populations except children ages 0 to 6. EPSDT criteria will be used for the evaluation for service for children.

# BH Level of Care Tools (cont.)

Early Childhood Services Intensity Instrument (ECSII) or Children and Adolescents Needs and Strengths (CANS) for infants, toddlers and preschoolers for children ages zero to 5.

Supports Intensity Scale (SIS) for I/DD services for members 5 years old and older.

SIS children's version for members from the ages of 5 to 16.  
SIS adult version for members ages 17 and up.

# Emergency BH Services and Referrals

## Emergency BH services

Providers should immediately refer any member in crisis or who is a threat to self or others for emergency care. An emergency referral for BH services does not require PA or preservice review.

## BH self-referrals

Blue Cross and Blue Shield of North Carolina does not require members to obtain a referral or PA for the first mental health or substance dependence assessment completed in a 12-month period. Members may self-refer to any BH care provider in the Healthy Blue network. Providers and members have access to a complete list of mental health and substance use disorder providers, including provider groups and practitioners specializing in children's mental health services. If the member is unable or unwilling to access timely services through community providers, call Healthy Blue Provider Services at **1-844-594-5072** for assistance.



# Behavioral Health Crisis Line

## Behavioral Health Crisis Line

Members have access to the Behavioral Health Crisis Line 24/7, 365 days a year through a confidential, toll-free number with immediate access to trained, skilled, licensed BH professionals who provide assistance for any type of BH distress the member may experience. We offer assistance to link members to supportive, available community resources.



**The BH Crisis line toll-free number is 1-844-594-5076.**

# BH Service Requests

- To request a prior authorization, visit <https://www.availity.com>.
- Providers can also request a prior authorization for inpatient mental health and substance use disorder services by calling **1-844-594-5072**, 24/7, 365 days a year. Be prepared to provide clinical information to support the request.
- Use the prior authorization request form on <https://provider.healthybluenc.com> to fax requests. Fax the PA form to the numbers below.

## Fax numbers

**For inpatient requests: 1-844-439-3574**

**For outpatient requests: 1-844-429-9636**

# BH Service Requests (cont.)

For assistance with BH services:

- Providers can call Healthy Blue Provider Services at **1-844-594-5072**.
- Members can call:
  - Healthy Blue Member Services at **1-844-594-5070 (TTY 711)**, Monday to Saturday from 7 a.m. to 6 p.m., including holidays.
  - The Behavioral Health Crisis Line at **1-844-594-5076**.

# Links to BH Form, Guidelines and Screening Tools

BH and substance use covered services —  
**<https://provider.healthybluenc.com>**

Services requiring PA — **<https://provider.healthybluenc.com>**

Noncovered diagnoses — **<https://provider.healthybluenc.com>**

Screening tools for primary care providers and BH  
providers — **<https://provider.healthybluenc.com>**





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