

A photograph of a male doctor in a white lab coat sitting at a desk, holding a white anatomical model of a human leg. He is looking down at the model. A young child with blonde hair, wearing a red and blue striped shirt, is sitting across from him, also looking at the model. The background is a classroom with anatomical charts on the wall.

Behavioral Health Provider Refresher: Behavioral Health for Children and Adolescents

Commonwealth of Massachusetts
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Training refresher topics

Behavioral Health for Children and Adolescents

- Covered services
- Billing codes and authorization requirements
- Joining our network
- Contact for questions
- Resources for providers
- Q&A

Covered services

Intermediate care and outpatient services must include, but are not limited to, the following services:

In-Home Behavioral Services

A combination of medically necessary behavior management therapy and behavior management monitoring. The in-home behavioral services must be available, when indicated, where the child resides, including in the child's home, a foster home, a therapeutic foster home or another community setting.

In-home behavioral services include:

- **Behavior management monitoring** — of a child's behavior, the implementation of a behavior plan and reinforcing implementation of a behavior plan by the child's parent or other caregiver,
- **Behavior management therapy** — that addresses challenging behaviors that interfere with a child's successful functioning. They must include:
 - A functional behavioral assessment and observation of the youth in the home and/or community setting,
 - Development of a behavior plan and supervision and
 - Coordination of interventions to address specific behavioral objectives or performance, including the development of a crisis-response strategy.
- Behavior management therapy may include short-term counseling and assistance.

Covered services

In-Home Therapy

Medically necessary therapeutic clinical intervention or ongoing training, as well as therapeutic support. The intervention or support must be provided where the child resides, including in the child's home, a foster home, a therapeutic foster home or another community setting. Where any carrier's Family Stabilization Treatment (FST) service is substantially similar to in-home therapy, it may be considered to meet this Notice's requirements.

- **Therapeutic clinical intervention** — must include:
 - A structured and consistent therapeutic relationship between a licensed clinician and a child and the child's family to treat the child's mental health needs, including improvement of the family's ability to provide effective support for the child and promotion of healthy functioning of the child within the family,
 - The development of a treatment plan and
 - The use of established psychotherapeutic techniques, working with the family or a subset of the family to enhance problem solving, limit setting, communication, emotional support or other family or individual functions.
- **Ongoing therapeutic training and support** — services that support implementation of a treatment plan pursuant to a therapeutic clinical intervention that must include, but not be limited to, teaching the child to understand, direct, interpret, manage and control feelings and emotional responses to situations and assisting the family in supporting the child and addressing the child's emotional and health needs.

Covered services

Mobile Crisis Intervention

A short-term, mobile, on-site, face-to-face therapeutic response service that is available 24 hours a day, 7 days a week to a child experiencing a behavioral health crisis. Mobile crisis intervention is used to identify, assess, treat and stabilize a situation, to reduce the immediate risk of danger to the child or others and to make referrals and linkages to all medically necessary behavioral health services and supports and the appropriate level of care.

- The intervention must be consistent with the child's risk management or safety plan, if any.
- Mobile crisis intervention includes a crisis assessment and crisis planning, which may result in the development or update of a crisis safety plan.

Intensive Care Coordination (ICC)

A collaborative service that provides targeted case management services to children and adolescents with a serious emotional disturbance, including individuals with co-occurring conditions, in order to meet the comprehensive medical, behavioral health and psychosocial needs of an individual and the individual's family, while promoting quality, cost-effective outcomes.

- This service includes an assessment, the development of an individualized care plan, referrals to appropriate levels of care, monitoring of goals and coordinating with other services and social supports and with state agencies, as indicated.
- This service must be based upon a system of care philosophy and the individualized care plan must be tailored to meet the individual's needs.
- This service must include both face-to-face and telephonic meetings, as indicated as clinically appropriate.
- ICC is delivered in office, home or other settings, as clinically appropriate.

Behavioral Health for Children and Adolescents

Covered services

Community-based Acute Treatment For Children And Adolescents (CBAT)

Mental health services provided in a staff-secure setting on a 24-hour basis, with sufficient clinical staffing to ensure safety for the child or adolescent, while providing intensive therapeutic services including, but not limited to:

- Daily medication monitoring
- Psychiatric assessment
- Nursing availability
- Specialized services (as needed)
- Individual, group and family therapy
- Case management
- Family assessment and consultation
- Discharge planning and
- Psychological testing, as needed

This service may be used as an alternative to or transition from inpatient services.

Whenever a carrier's Accurate Residential Treatment (ART) program is substantially similar to CBAT, it may be considered to meet this Notice's requirements.

Covered services

Intensive Community-based Treatment For Children And Adolescents (ICBAT)

Provides the same services as CBAT for children and adolescents but of higher intensity, including more frequent psychiatric and psychopharmacological evaluation and treatment, and more intensive staffing and service delivery.

- ICBAT programs have the capability to admit children and adolescents with more acute symptoms than those admitted to CBAT.
- ICBAT programs can treat children and adolescents with clinical presentations similar to those referred to inpatient mental health services but who can be cared for safely in an unlocked setting.
- Children and adolescents may be admitted to an ICBAT directly from the community as an alternative to inpatient hospitalization. ICBAT is not used as a step-down placement following discharge from a locked, 24-hour setting.
- Whenever a carrier's ART program is substantially similar to ICBAT, it may be considered to meet this Notice's requirements.

Billing codes and authorization requirements

Services that REQUIRE authorization		Units
H0017 Rev 1001+H0017	CBAT without R&B CBAT with R&B	Per day
H0018 Rev 1001+H0018	ICBAT without R&B ICBAT with R&B	Per day
97151 97152, 0362T	Applied Behavior Analysis — Assessment	15 min
97153 - 97158 0373T	Applied Behavior Analysis — Treatment	15 min
Services that DO NOT require authorization		
H2019, T1027, 99510	In-Home Therapy/Family Stabilization Team	15 min No unit associated with this code
H2014	In-Home Behavioral Services	15 min
H0023	Intensive Care Coordination	Per day
H2011	Mobile Crisis Intervention	15 min

Authorizations can be requested in two (2) ways:

- Contracted providers can request authorizations for the services listed above via the online portal system Navinet at [Navinet Sign In](#). You'll need to log-in to request authorizations.
- Call us using the number on the member's ID card.

Joining our network

How to apply to join Aetna Behavioral Health

Individual or Group Behavioral Health Providers application

Once completed, you should receive acknowledgement of your application within 7 to 10 business days.

Joining the Network FAQs

Contact for questions related to contracting

Network contact name	Phone number/email address
Scott Romiti Provider Account Executive	Phone: 1-214-200-8049 Email address: <u>RomitiS@Aetna.com</u>

Resources for behavioral health providers

Behavioral Health for Children and Adolescents — member information found on Aetna.com

Massachusetts – Behavioral Health Child and Adolescent Services

Contact information for providers

For all questions and claims issues please contact the Provider Services Center

- HMO plans: **1-800-624-0756**
- PPO and Indemnity plans: **1-888-632-3862**
- Visit **our website**

Email address for provider questions

Visit **our website** — Links are provided throughout our website to contact us via email

Aetna web links

(If the link provided does not connect, please copy and paste into your browser)

Provider main web page

Behavioral Health for Children and Adolescents

Resources for behavioral health providers

Specific web links

Aetna secure provider website through Availity (eligibility, precertification, claims and more)

Aetna education and manuals

Aetna quick reference guide

Provider quick reference job aids

Claims, payment and reimbursement

Provider forms

Behavioral Health for Children and Adolescents

Resources for behavioral health providers

For in-network providers only to update their Aetna information

Webinars

Please register through our provider portal at **Availity**.

Provider manuals

Behavioral Health Provider Manuals

Behavioral Health for Children and Adolescents

Resources for behavioral health providers

Additional information

Newsletters and news

Precertification lists

Behavioral health specific precertification list

Clinical policy bulletins

LOCAT, ABA and ASAM guidelines

Patient care programs and quality assurance

***NOTE:** Most Aetna links can be accessed by both in-network and out-of-network providers.

Q & A

Thank you