

PROVIDER Update



Health Net®

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Behavioral Health Treatment Coverage for EPSDT Members

On March 2, 2018, the Department of Health Care Services (DHCS) issued All Plan Letter (APL) 18-006, notifying health plans that effective July 1, 2018, health plans must cover behavioral health treatment (BHT) services without an autism spectrum disorder (ASD) diagnosis for members under age 21 under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit. DHCS will transition the provision of BHT services for eligible members under age 21 without an ASD diagnosis from the Regional Centers to managed care plans.

Providers contracting with participating physician groups (PPGs) should consult their PPGs for guidance.

REFERRAL COORDINATION

Primary care physicians (PCPs) are responsible for referring EPSDT-eligible members, identified as needing BHT services, regardless of diagnosis, to MHN, Health Net Community Solutions, Inc.'s (Health Net's) behavioral health subsidiary, for assessment and referral to a mental health provider. Health Net coordinates with MHN to manage the behavioral health benefits of Health Net members.

BHT services may include, but are not limited to:

- Applied behavioral analysis
- Individual or family training
- Client/parent support behavioral intervention training
- Adaptive skills trainer by a qualified BHT provider

PRIOR AUTHORIZATION

Participating PCPs and behavioral health providers must contact MHN at 1-800-950-4777 to obtain prior authorization for BHT Services, including applied behavioral analysis (ABA). Prior authorization is not required for initial assessment for outpatient behavioral health services.

ADDITIONAL INFORMATION

Relevant sections of Health Net's provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library, located on Health Net's provider website at provider.healthnet.com.

If you have questions regarding the information contained in this update, contact the Health Net Medi-Cal Provider Services Center within 60 days at 1-800-675-6110.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

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PROVIDER COMMUNICATIONS

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