

Support Healthy Child Development and Mental Health With Dyadic Services and Family Therapy Benefits

Treat Medi-Cal children and their parents/caregivers together

Dyadic services and family therapy benefits are available to Medi-Cal members under age 21. Refer to this update for information on eligibility, claims billing and referrals. For more information about dyadic services and family therapy benefit requirements, refer to the Department of Health Care Services All Plan Letter (APL) 22-029¹.

Dyadic services refer to serving both parent(s) or caregiver(s) and child together as a dyad and is a form of treatment that targets family well-being as a mechanism to support healthy child development and mental health.

Dyadic services

Dyadic services include dyadic behavioral health (DBH) well-child visits, dyadic comprehensive community support services, dyadic psychoeducational services, and dyadic family training and counseling for child development. The DBH well-child visit is provided for both child and parent(s)/caregiver(s) together, preferably within the pediatric primary care setting the same day as the medical well-child visit. Dyadic services screen for behavioral health problems, interpersonal safety, tobacco and substance misuse and social drivers of health (SDOH), such as food insecurity and housing instability, and include referrals for appropriate follow-up care.

Facilities or clinics that offer integrated physical health and behavioral health services, such as health centers and Federally Qualified Health Centers (FQHCs), are able to conduct the medical well-child visit, the DBH well-child visit and some or all of the ongoing dyadic services. Physicians who do not offer integrated behavioral health services are able to initiate dyadic services by conducting the medical well-child visit and making referrals to behavioral health services, the Plan's behavioral health administrator, for the DBH well-child visit and ongoing dyadic services.

Family therapy

Family therapy is covered under Medi-Cal's non-specialty mental health services benefit, for members under age 21 who are at risk for behavioral

THIS UPDATE APPLIES TO:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers
- Behavioral Health Providers

PROVIDER SERVICES

CalViva Health Medi-Cal (including ECM and CS providers) –
888-893-1569

Behavioral health providers –
844-966-0298

PROVIDER PORTAL

provider.healthnetcalifornia.com

health concerns, and for whom family therapy is indicated, but may not have a mental health diagnosis. Family therapy comprises at least two family members receiving therapy together provided by a mental health provider. All family members do not need to be present for each service. For example, parents or caregivers can qualify for family therapy without their child present, if necessary.

The Plan reimbursement includes, but is not limited to, child-parent psychotherapy, Triple P (Positive Parenting Program) and parent-child interaction therapy.

Eligibility criteria

Members under age 21 and their parent(s)/caregiver(s) are eligible for DBH well-child visits when:

- Delivered according to the Bright Futures/American Academy of Pediatrics periodicity schedule for behavioral/social/emotional screening assessment.
- Medically necessary, in accordance with Medi-Cal’s Early and Periodic Screening, Diagnostic and Treatment (EPSDT) standards.
- The child is enrolled in Medi-Cal. The parent(s) or caregiver(s) does/do not need to be enrolled in Medi-Cal or have other coverage so long as the care is for the direct benefit of the child.

Prior authorization is not required for dyadic services.

Claims billing

Refer to the table below for dyadic services and billing codes. Encounters for dyadic services must be submitted with allowable current procedural terminology (CPT) codes as outlined in the Medi-Cal Provider Manual.

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Dyadic Services	Description/Billing Codes
Services for members under age 21 (when billed to the child’s Medi-Cal ID with the modifier U1)	<ul style="list-style-type: none"> • Dyadic behavioral health (DBH) well-child visits: H1011. • Dyadic comprehensive community support services, per 15 minutes: H2015 (separate and distinct from California Advancing and Innovating Medi-Cal’s (CalAIM) Community Supports). • Dyadic psychoeducational services, per 15 minutes: H2027. • Dyadic family training and counseling for child development, per 15 minutes: T1027.
Services for parent/caregiver (services provided to the caregiver for the benefit of the child during a child’s visit, and billed using the child’s Medi-Cal ID with the modifier U1)	<ul style="list-style-type: none"> • ACE screening: G9919, G9920 • Alcohol and drug screening, assessment, brief interventions and referral to treatment (SABIRT): G0442, H0049, H0050. • Brief emotional/behavioral assessment: 96127. • Depression screening: G8431, G8510. • Health behavior assessments and interventions: 96156, 96167, 96168, 96170, 96171. • Psychiatric diagnostic evaluation: 90791, 90792. • Tobacco cessation counseling: 99406, 99407.

Claims submission and electronic payer ID information

Provider sites with integrated physical health and behavioral health services, such as Community Health Centers, FQHCs, and some primary care sites, will be able to administer the medical well-child visit, the DBH well-child visit and some or all of the additional dyadic services (depending on scope of practice). Use the below information to submit claims to the Plan and check claim status.

- Claims status: 844-966-0298 (option 1).
- Electronic payer ID: 95567.
- Claims mailing address:

Health Net Medi-Cal Claims
PO Box 9020
Farmington, MO 63640-9020

Referral to behavioral health services

Primary care physicians (PCPs) or sites that do not offer behavioral health services can initiate dyadic services by conducting the medical well-child visit and referring members to contact the member services number listed on the back of their ID card to connect with a dyadic services provider who will conduct the DBH well-child visit and determine needs for ongoing dyadic services:

- **24/7 telephonic support: 888-426-0030.** Let members know they can call Behavioral Health Services directly to find a behavioral health provider or specialist, including the best telehealth options. Help the member call the Behavioral Health Services customer service number during an office visit.
- **Visit www.healthnet.com/portal/providerSearch.action.** Find a behavioral health provider through the online provider directory. Members can choose a provider – including one with telehealth service.

Dyadic services providers

Referrals can be made to the following dyadic services providers^{2,3}:

- Licensed clinical social workers.
- Licensed professional clinical counselors.
- Licensed marriage and family therapists.
- Licensed psychologists.
- Psychiatric physician assistants.
- Psychiatric nurse practitioners.
- Psychiatrists.

Dyadic Services & Family Therapy Benefit training

You can take a training to learn more about dyadic services and family therapy benefits, including information on:

- Member eligibility
- Covered services
- How to administrate services

To register for the training, go to bit.ly/Dyadic-training.

Additional information

Behavioral health trainings available to support your work with CalAIM and other special populations! Medi-Cal physicians and providers can register for live behavioral health webinar trainings, including Motivational Interviewing, Social Determinants of Health, De-escalation Techniques, and more. Visit https://bit.ly/HN_Behavior_Health_Training > *Behavioral Health Training Series* to register today.

If you have questions regarding the information contained in this update, contact CalViva Health at 888-893-1569. Behavioral health providers can call 844-966-0298.

¹<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPsandPolicyLetters/APL2022/APL22-029.pdf>.

²Associate marriage and family therapists, associate professional clinical counselors, associate clinical social workers, and psychology assistants may render services under a supervising clinician.

³Appropriately trained nonclinical staff, including community health workers, are not precluded from screening members for issues related to SDOH or performing other nonclinical support tasks as a component of the DBH visit, as long as the screening is not separately billed.