




Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth

MassHealth
Community Health Center Bulletin 80
June 2014

TO: Community Health Centers Participating in MassHealth
FROM: Kristin L. Thorn, Medicaid Director 
RE: **Behavioral Health Assessment Claims for Members Under 21**

Please note: This bulletin only applies to Community Health Centers (CHCs) that are approved Mental Health Centers (MHCs), which follow the Mental Health Center program regulations.

Overview

For members under 21, MassHealth now pays for initial behavioral health assessments only when completed in conjunction with the Child and Adolescent Needs and Strengths (CANS) tool.

In order to ensure that providers use the CANS tool with initial behavioral health assessments, effective for dates of service on or after May 1, 2014, failure to include an "HA" modifier using CPT Service Code 90791 will result in a denial of the claim for Edit 8163 "HA" MODIFIER REQUIRED FOR CODE 90791 -NOT PRESENT for members under 21.

Providers should make billing departments and their fiscal intermediaries aware of this critical edit in order to avoid denial of claims for behavioral health assessments using CPT Service Code 90791 for members under 21.

Frequency Limits

For members under 21, MassHealth will allow only two 90791 "HA" claims per member per site in a 90-day period. MassHealth will allow a new set of 90791 "HA" claims when the member experiences a lapse in service of six months or more with the original provider.

Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Services Center at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.