



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

MassHealth
Managed Care Entity Bulletin 65
August 2021

TO: Accountable Care Partnership Plans and Managed Care Organizations Participating in MassHealth and the MassHealth Behavioral Health Vendor

FROM: Amanda Cassel Kraft, Acting Assistant Secretary for MassHealth

RE: Preventive Behavioral Health Services for Members Younger than 21

Applicable Managed Care Entities and PACE Organizations

- Accountable Care Partnership Plans (ACPPs)
- Managed Care Organizations (MCOs)
- MassHealth's behavioral health vendor
- One Care Plans
- Senior Care Organizations (SCOs)
- Program of All-inclusive Care for the Elderly (PACE) Organizations

Background

The COVID-19 pandemic is significantly and uniquely impacting the well-being of children and adolescents. This is particularly true in populations already at risk for poor health outcomes due to longstanding inequities—many Black and Latinx children and youth and individuals in the perinatal period are experiencing increased anxiety and depression as well as other behavioral health concerns. Absent targeted intervention, many of MassHealth's youngest members may be at risk of developing clinical level behavioral health disorders and worsening health. Earlier identification and intervention are key to providing children, adolescents, and their caregivers with needed behavioral health supports to preserve and promote their well-being.

For many youth, short-term interventions in supportive group, individual, or family settings cultivate coping skills and strategies for symptoms of depression, anxiety, and other social/emotional concerns, which may prevent the development of behavioral health conditions. Very young children can benefit from interventions that target the well-being of the caregiver-child dyad, as well as provide guidance for caregivers on how to support their developmental and emotional health.

To address and mitigate the negative impacts of the pandemic on children and adolescents, and to further healthy developmental outcomes for MassHealth-enrolled youth, managed care organizations (MCOs), Accountable Care Partnership Plans (ACPPs), and the behavioral health vendor (collectively referred to in this bulletin as "managed care plans") must cover medically necessary preventive behavioral health services for members from birth until age 21. Managed care contracts will be amended to include this requirement.

Preventive Behavioral Health Services

Effective for dates of service on or after September 1, 2021, members under age 21 are eligible for preventive behavioral health services if they have a positive behavioral health screen (or, in the case of an infant, a positive post-partum depression screening), even if they do not meet criteria for behavioral health diagnosis and therefore do not meet medical necessity criteria for behavioral health treatment.

Preventive behavioral health services must be recommended by a physician or other licensed practitioner practicing within their scope of licensure to recommend such services. To determine the member's needs, a provider must administer and document the results of an age-appropriate behavioral health screen using a tool from the list of MassHealth approved screeners in Appendix W of the MassHealth provider manual (also listed at www.mass.gov/info-details/learn-about-the-approved-masshealth-screening-tools). Managed care plans may not require a diagnostic assessment, such as the Child and Adolescent Strengths and Needs (CANS), before the initiation of preventive behavioral health services.

Utilization Management

Managed care plans must cover up to six sessions of preventive behavioral health services per member without prior authorization. During delivery of preventive behavioral health services, if the provider determines that a member has further clinical needs, managed care plans should ensure that the provider refers the member and family for evaluation, diagnostic, and treatment services.

After six sessions, if the provider believes that further preventive behavioral health services are needed, the plan may require the provider to submit documentation to support the clinical appropriateness of ongoing preventive services. Managed care plans may require providers to complete a diagnostic assessment, including the CANS, as part of the plan's determination of the ongoing need for preventive services after the initial six sessions.

Provider Types and Billing

Managed care plans must ensure that preventive behavioral health services are provided by a qualified and credentialed behavioral health clinician, or a non-licensed clinician or trainee under supervision. Managed care plans must cover group preventive behavioral health sessions when delivered in community- and school-based outpatient settings, and must cover individual, family, and group preventive behavioral health sessions when provided by a behavioral health clinician practicing in an integrated pediatric primary care setting. Services provided through the School-Based Medicaid Program are not covered by this bulletin.

Managed care plans must cover preventive behavioral health services, using the following billing codes:

- Community- or school-based outpatient providers:
 - 90853 Group psychotherapy (other than multiple-family group).

- Primary care providers with embedded behavioral health clinician:
 - 90832 Psychotherapy with patient and/or family member
 - 90834 Psychotherapy with patient and/or family member
 - 90846 Family psychotherapy (conjoint psychotherapy) (without patient present)

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- 90847 Family psychotherapy (conjoint psychotherapy) (with patient present)
- 90849 Multiple-family group psychotherapy
- 90853 Group psychotherapy (other than multiple-family group)

All claims for preventive behavioral health services, regardless of provider type, must be submitted with modifier EP on the claim. All claims must include the most clinically appropriate ICD diagnosis code, including, as appropriate, Z codes which may be used as the primary diagnosis, when clinically appropriate. Preventive behavioral health services provided to the caregiver-child dyad should be billed under the child's MassHealth ID when such services are directly related to the needs of the child and such services are delivered to the infant and caregiver together.

For dates of service on or after January 1, 2022, EOHHS intends to direct managed care plans to pay for preventive health services at or above the rates established in Appendices T and L of the managed care plans' contracts for the codes set forth above, when billed with the EP modifier.

Resources and Referrals

Managed care plans should ensure that preventive behavioral health providers are made aware of the expanded coverage described in this bulletin, as well as of the following resources in order to make referrals and linkages to other MassHealth services available to children and youth:

- The Massachusetts Behavioral Health Access (MABHA) (www.mabhaccess.com/Home.aspx) website helps both providers and individuals locate openings in mental health and substance use disorder services. EOHHS welcomes everyone to search for services that they can access directly from their community.
- Children's Behavioral Health Initiative (CBHI): www.mass.gov/service-details/cbhi-brochures-and-companion-guideMass.gov, which includes a brochure for families that can be downloaded or requested in hard copy, free of charge.
- For pediatric psychiatric consultation and referral for ongoing behavioral health care, contact MCPAP at www.mcpap.com.
- More information and resources on perinatal behavioral health can be found through the Massachusetts Bureau of Family Health and Nutrition at www.mass.gov/service-details/postpartum-depression-resources-for-healthcare-providers and through MCPAP for Moms at www.mcpapformoms.org.

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- For training and referral services, MCPAP for Moms provides real time, perinatal psychiatric consultation and care coordination for obstetric, pediatric, primary care, and psychiatric providers to help identify and manage depression and other mental-health concerns during and after pregnancy. Resources specific to those experiencing peripartum depression, including available support groups and experienced behavioral health providers, can be found on the Post-partum Support International website at www.postpartum.net, which provides support for those experiencing perinatal depression. Calls to the helpline are responded to as soon as possible.

MassHealth Website

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Questions

If you have questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.