

Behavioral Health services for Children and Adolescents

On July 1, 2019, many Massachusetts private health insurance plans began paying for certain *Behavioral Health services for Children and Adolescents* (BHCA). Additional behavioral health services will begin on July 1, 2020 (Additional Services). You will need to check with your insurance plan or your employer's human resources department to find out if your health insurance will cover these important services. The contact information for your insurance plan is on your health insurance card.

FAQS

When does this bulletin go into effect and what services are covered?

While the services listed below are required to be part of the benefit, they are not available as a package.

As of July 1, 2019

- In-home behavioral services
 - Behavior management monitoring
 - Behavior management therapy
- In-home therapy or Family Stabilization Treatment
 - Therapeutic clinical intervention
 - Ongoing therapeutic training and support
- Mobile crisis intervention
- Intensive care coordination
- Community-based acute treatment (CBAT)
- Intensive community-based acute treatment (ICBAT)

Beginning July 1, 2020

- Therapeutic mentoring services
- Family Support and training / Family Partner support

[For general descriptions of these services click here. For more specifics, consult with your child's behavioral health provider.](#)

Where can services take place?

Insurance plans are expected to develop networks of providers to deliver services. Based on a plan's network, services should take place in the least restrictive, clinically appropriate setting. These settings might include a clinic, home, or a community setting.



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When does this coverage begin for my plan?

Coverage for most Behavioral Health services for Children and Adolescents starts on your first annual plan renewal date that occurs on or after July 1, 2019. You can find out when your health plan renews by checking your health plan documents, calling your health insurance company, or asking your employer's Human Resources Department.

How do I know if my plan is participating?

If your plan is fully-insured (also sometimes called fully-funded) it is participating in covering Behavioral Health services for Children and Adolescents. Providing the benefit is a requirement for full-insured plans. A fully-insured plan is a plan purchased by your employer from an insurance company. You and/or your employer pay the premiums and the insurance company pays the claims for covered services. A plan purchased by you through the Health Connector or directly from a Massachusetts health insurance company is also fully-insured/fully funded.

Self-insured or self-funded health plans are not participating plans. Self-funded health plans often look the same as a fully-insured plan, because employers usually hire an insurance company to manage or administer the self-funded health plans. Your health plan card/materials may have an insurance company name or logo on them, even if the plan is self-funded. Please do not assume that an insurance company name or logo on your card/materials means that your health plan provides the Behavioral Health services for Children and Adolescents.

If you are not certain which type of plan you have, ask your employer's Human Resources Department or contact your plan directly to ask if these services are covered.

Is MassHealth included?

MassHealth is not subject to this requirement. MassHealth already covers very similar services through the *Children's Behavioral Health Initiative* (CBHI): <https://www.mass.gov/childrens-behavioral-health-initiative-cbhi>

Who can refer a child for services?

A child's primary care provider, pediatrician, or a licensed mental health professional can refer a child for services. A child's parent or legal guardian can directly contact behavioral health providers in their community to seek behavioral health services.



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Are there other eligibility requirements?

Yes. Each plan has set specific criteria to determine eligibility for each service. A behavioral health provider from your plan will work with you to understand if your child qualifies and may benefit from these services.

Are there age limits?

Yes. Services are covered until the individual's 19th birthday. Individuals 19 to 21 may be able to access similar services through MassHealth Secondary. To learn more about applying for MassHealth visit: <https://www.mass.gov/how-to/apply-for-masshealth-the-health-safety-net-or-the-childrens-medical-security-plan>

Are there other limits?

No. There is not a set number of days or visits that are covered.

Are educational services affected?

No. Tuition-based programs that offer educational, vocational, recreational, or personal development activities, such as a therapeutic school, camp, or wilderness programs are not required to be covered. But the health plan must provide coverage for medically necessary covered services provided while the individual is in the program, if they would otherwise be covered, so long as the services are billed separately.

I HAVE SUPPLEMENTAL COVERAGE THROUGH MASSHEALTH WHICH PAYS FOR MY CHILD TO RECEIVE BEHAVIORAL HEALTH SERVICES, WILL THIS COVERAGE CONTINUE?

Yes. The advent of commercial coverage for these services has no bearing on eligibility for MassHealth supplemental coverage.

How can I make sure that my child continues to receive care?

1. Find out what type of insurance plan you have. Is it fully-funded/fully-insured? If so, this change applies to you.
2. Talk with your health plan. Ask if they will continue to cover your child's current provider(s) and services. If not, either request a list of providers that will be in your network or work with your health plan to find appropriate providers.
3. Talk with your child's current behavioral health provider(s). Share your insurance information and ask if there will be any impact to your child's services and if your child will be able to continue with their current provider(s).





What should I do if I have questions about this change?

Contact one of the following support organizations for information and help:

- Parent/Professional Advocacy League: Visit ppal.net or call (866) 815-8122.
- Mass Family Voices/F2F Health Information Center at the Federation for Children with Special Needs: Visit fcsn.org/mfv/ or call (800) 331-0688.
- Autism Insurance Resource Center: Visit www.massairc.org or call (774) 455-4056.

Who should I contact if I have a problem with my health insurance plan?

You can contact the organizations above if you experience any problems. As these new services begin to be offered, it is especially important to report any issues or concerns you have in accessing care for your child to the Massachusetts Division of Insurance:

Massachusetts Division of Insurance:

Toll Free Number: (877) 563-4467

Main Phone Line: (617) 521-7794

Email Customer Service: doicss.mailbox@state.ma.us



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