Behavioral Health Care Authorization and Notification

Unless otherwise specified, information in this policy does not apply to members with the Choice or Choice Plus products offered through Passport Connect℠. For UnitedHealthcare’s related policies/procedures, please go to www.UnitedHealthcareOnline.com or call 800-708-4414.

Overview

Behavioral Health and Substance Use Disorder (SUD) services are managed through an arrangement with United Behavioral Health, Inc. d/b/a Optum, the nation’s largest managed behavioral health organization.

Under this agreement, Optum is responsible for management of the following:

- Credentialing and re-credentialing of behavioral health and SUD providers
- Utilization management (including prior authorization and referral management) of behavioral health and SUD benefits
- Behavioral health and SUD provider network development and management
- Administration of behavioral health and SUD benefits, including member services

In accordance with the National Committee for Quality Assurance (NCQA) requirements, Harvard Pilgrim retains oversight and overall accountability for all delegated activities.

Behavioral Health Access Center

Members and providers may contact Harvard Pilgrim’s Behavioral Health Access Center at 888-777-4742 for assistance in accessing behavioral health or SUD benefits. (A referral from the PCP is not required.)

- The Access Center is open for routine inquiries Mon.– Fri., 8 a.m.– 5 p.m.
- Access Center staff (including licensed behavioral health clinicians) are available 24 hours a day, 7 days a week for:
  - Members or providers needing urgent or emergent assistance with behavioral health/SUD needs, including assistance with admissions to alternative level of care settings.
  - Providers needing benefit information or authorization for inpatient or outpatient behavioral health/SUD services.

Online Resources

Members and providers may also access Optum’s Live and Work Well website (www.liveandworkwell.com) for more information on behavioral health/SUD benefits (login required).

- The Live and Work Well website features an online provider directory to search for available providers by location and treatment options.
- Members and providers may also access behavioral health/SUD related articles, assessments, guides, self-help programs, and other wellness resources.

Providers may also access Optum’s Provider Express website (www.providerexpress.com) for clinical and administrative resources.
The Provider Express website provides information on the ACE and ALERT programs, Best Practice, Coverage Determination, and Level of Care Guidelines, as well as Network manuals.

Providers may also check member eligibility, provide notification of emergent/urgent inpatient admission, submit authorization requests, file claims, and review the status of an appeal online.

The Provider Express website also features training resources and the Virtual Visit (Telehealth) Platform.

**Written Authorization**

Optum is responsible for notifying treating providers when behavioral health or SUD services are authorized. Written authorization includes the at a minimum, the following information:

- Member name
- HPHC ID Number
- Procedure Code
- Procedure Code Description
- Authorized number of services (i.e. days, hours, sessions)
- Authorization effective dates
- Type of services that are authorized

**Crisis Assessment**

A mental health crisis is an intensive behavioral, emotional, substance use, or psychiatric situation which, if left untreated, could result in an emergency situation.

In a mental health crisis, neither a referral from the PCP, nor prior authorization from Harvard Pilgrim is required for a crisis (i.e., emergency) assessment (pre-admission evaluation). After the evaluation, contact Harvard Pilgrim’s Behavioral Health Access Center at 888-777-4742 to obtain assistance with admissions to alternative level of care settings, and/or the coordination of behavioral health care.

**Emergency Care**

Harvard Pilgrim covers emergency services that are medically necessary to screen and stabilize members in a behavioral health/SUD emergency. Members who believe they are having a behavioral health/SUD emergency are encouraged to seek care at the nearest emergency facility. Neither a referral from the PCP or authorization from Harvard Pilgrim are required.

**Emergency Inpatient Behavioral Health Admissions**

Admitting hospitals are responsible for notifying Harvard Pilgrim’s delegate, Optum, by calling the Behavioral Health Access Center at 888-777-4742 or going online to the Optum Provider Express website (www.providerexpress.com), within two (2) business days of an emergent/urgent inpatient admission from an Emergency Department.

Access Center clinicians are available 24 hours a day, seven days a week to assist with placements, and emergent or urgent referral requests.

- Prior authorization is not required for post-stabilization services at an acute (24-hour) level of care facility following an Emergent Inpatient Behavioral Health/SUD Admission.
Non-Emergent Inpatient Behavioral Health Admissions

Prior authorization is required for non-emergent inpatient admissions including:

- Psychiatric admissions
- Psychiatric observation bed
- Substance Use Disorder (SUD) detoxification and treatment

Behavioral health providers are responsible for contacting Harvard Pilgrim’s Behavioral Health Access Center at 888-777-4742 to obtain prior authorization.

Massachusetts Plans Only

Under an HMO plan, prior authorization is not required to obtain Acute Treatment Services (ATS) or Clinical Stabilization Services (CSS) from a plan provider. Under a POS or PPO plan, prior authorization is not required for ATS or CSS from either a plan provider or non-plan provider. ATS/CSS services provided beyond the first 14-day period may be subject to concurrent review under the terms of the member’s plan. Providers should notify the Behavioral Access Center within 48 hours of an admission for ATS/CSS, however coverage will not be denied for the first 14 days of ATS/CSS for failure to notify. For substance use disorder treatment services other than ATS/CSS, prior authorization is not required when provided by a provider certified or licensed by the Massachusetts Department of Public Health.

Alternative to Hospital Programs

Prior authorization is required before Harvard Pilgrim members are admitted to any alternative programs for the treatment of psychiatric condition or substance use disorder. Alternatives to behavioral health and substance use disorder hospitalization include:

- Day treatment
- Intensive outpatient treatment (IOP)
- Partial hospitalization program (PHP)
- Programs providing multi-model therapeutic interventions

Alternative program stays are reviewed concurrently to evaluate the on-going medical necessity of continued treatment, and to identify opportunities for timely discharge planning.

Massachusetts Plans Only

Under an HMO plan, prior authorization is not required to obtain Acute Treatment Services (ATS) or Clinical Stabilization Services (CSS) from a Plan Provider. Under a POS or PPO plan, prior authorization is not required for ATS or CSS from either a plan provider or non-plan provider. ATS/CSS services provided beyond the first 14-day period may be subject to concurrent review under the terms of the member’s plan. Providers should notify the Behavioral Access Center within 48 hours of an admission for ATS/CSS, however coverage will not be denied for the first 14 days of ATS/CSS for failure to notify. For substance use disorder treatment services other than ATS/CSS, prior authorization is not required when provided by a provider certified or licensed by the Massachusetts Department of Public Health.

Outpatient Services

A referral from a PCP is not required for routine outpatient behavioral health/SUD services, but providers may contact Harvard Pilgrim’s Behavioral Health Access Center to confirm member eligibility and benefit information. Members may self-refer to in-network providers or contact the Access Center for assistance in accessing behavioral health/SUD services. (Notification for routine, in-network outpatient behavioral health/SUD services are not required.)
Routine outpatient behavioral health/SUD services include:

- Medication management
- Psychiatric consultation and evaluation
- Substance Use Disorder (SUD) treatment
- Therapy sessions

Non-routine outpatient behavioral health/SUD services require authorization and include the following:

- Intensive outpatient program (IOP) treatment
- Partial hospitalization (PHP) and day treatment programs
- Outpatient electroconvulsive treatment (ECT)
- Transcranial Magnetic Stimulation (TMS) for major depression
- Psychological testing and neuropsychological assessment
- Extended outpatient treatment visits of more than 60 minutes in duration (53+ minutes per the CPT Time Rule) with or without medication management when obtained from a Non-Plan Provider (not applicable to Massachusetts fully insured plans).
- Applied Behavioral Analysis (ABA) for the treatment of autism. *(Please note: This benefit may not be offered under all self-insured plans.)*

**Massachusetts Plans Only**

Under an HMO plan, prior authorization is not required to obtain Acute Treatment Services (ATS) or Clinical Stabilization Services (CSS) from a Plan Provider. Under a POS or PPO plan, prior authorization is not required for ATS or CSS from either a plan provider or non-plan provider. ATS/CSS services provided beyond the first 14-day period may be subject to concurrent review under the terms of the member’s plan. Providers should notify the Behavioral Access Center within 48 hours of an admission for ATS/CSS, however coverage will not be denied for the first 14 days of ATS/CSS for failure to notify. For Substance Use Disorder treatment services other than ATS/CSS, prior authorization is not required when provided by a provider certified or licensed by the Massachusetts Department of Public Health.

**Clinical Care Management**

Collaboration with PCPs, mental health providers, community agencies and members are an essential component of Optum’s behavioral health case management program. Licensed behavioral health clinicians work collaboratively with members and/or providers to coordinate appropriate inpatient or outpatient mental health and substance use disorder treatment for Harvard Pilgrim members.

- Optum is committed to supporting the role of the PCP in coordinating the member’s care.
- Optum expects that behavioral health/SUD providers will, when possible, obtain a signed Release of Information Form from the member, and exchange relevant treatment information with the PCP as clinically appropriate.
- Based on input from the treatment team, behavioral health care managers use evidence-based clinical criteria to determine the appropriate level of care for inpatient and outpatient behavioral health and substance use disorder services.
- Medical professionals are encouraged to contact the Behavioral Health Access Center to discuss individual patient situations and determine who might benefit from behavioral health or substance use disorder services.
Appeals

HMO, POS, PPO and Medicare Enhance (Fully Insured)
Optum reviews all first-level appeals. If Optum does not approve a first level appeal, the appeal is forwarded to Harvard Pilgrim’s Member Appeals and Grievances Department for further review.

Self-Insured Employer Groups
Members of self-insured employer groups appeal directly to Harvard Pilgrim Member Appeals and Grievances without review by Optum.

Rhode Island Members
For Rhode Island members, the appeals process is completed entirely by Optum.

Maine Requirements for Management of Behavioral Health Benefits for Members Aged 21 Years or Younger
As required under applicable Maine law, for members enrolled in a Maine fully insured plan, Optum may not deny treatment for mental health services that use evidence-based practices and are determined to be medically necessary health care for an individual 21 years of age or younger.

For purposes of this section, evidence-based practices means clinically sound and scientifically based policies, practices and programs that reflect expert consensus on the prevention, treatment and recovery science, including, but not limited to, policies, practices and programs published and disseminated by the Substance Abuse and Mental Health Services Administration and the Title IV-E Prevention Services Clearinghouse within the United States Department of Health and Human Services, the What Works Clearinghouse within the United States Department of Education, Institute of Education Sciences and the California Evidence-Based Clearinghouse for Child Welfare within the California Department of Social Services, Office of Child Abuse Prevention.

PUBLICATION HISTORY
01/01/12 removed First Seniority Freedom information from header
02/15/12 minor edit for clarity
03/15/12 updated authorization information for non-emergent inpatient behavioral health admissions; updated referral information for outpatient services
06/15/12 added notification information; added crisis assessment section
05/15/13 added authorization requirements for non-routine outpatient services
10/15/13 added transcranial magnetic stimulation for major depression to outpatient services
10/01/15 added substance abuse treatment authorization and notification information effective 10/01/15
01/09/19 added online resources information and clarified authorization and referral requirements; added information for Massachusetts plans only
07/10/20 changed UBH to Optum and substance abuse to substance use disorder (SUD) throughout; clarified extended outpatient treatment visits requirements; added information excluding all Massachusetts fully insured plans.
09/15/22 added new Section, Maine Requirements for Management of Behavioral Health Benefits for Members Aged 21 Years or Younger, to incorporate regulatory requirements of 2021 Maine House Paper 1416, An Act to Improve Children’s Mental Health by Requiring Insurance Coverage for Certain Mental Health Treatment.