

How do providers identify the correct payer?

Provider can use the table below to identify the payer for a service based on the service type and the client’s health care coverage.

This Mental Health Services billing guide is not applicable to the services marked with an asterisk (*). Contact the managed care organization for information and instructions regarding provider credentialing, benefits, prior authorization requirements, and billing.

Apple Health (Medicaid) Coverage	Outpatient mental health services <i>Lower-acuity outpatient mental health services provided under medical benefit manager</i>	Professional mental health services billed separately AND delivered during an ER visit when the client is then transferred to a different inpatient facility for a BHO/ integrated managed care plan-paid admission or when no inpatient admission follows the ER visit (POS 23- ER)	ER facility services for a client transferred to a different inpatient facility for a BHO/ integrated managed care plan-paid admission or when no inpatient admission follows the ER visit	Professional mental health services delivered during an inpatient psychiatric admission (POS 21- inpatient)	Outpatient mental health services <i>Higher-acuity outpatient mental health services</i>	Inpatient psychiatric services, including ITA in the community hospital setting	Outpatient crisis intervention for mental health services
FFS Apple Health client with no MCO, BHO, or integrated managed care enrollment for behavioral health services – applicable statewide, including designated integrated managed care regions	ProviderOne	ProviderOne	ProviderOne	ProviderOne	ProviderOne (see Part II of this guide – Specialized Mental Health Services)	ProviderOne	BHO/BH-ASO
MCO-enrolled client with no BHO – applicable to the entire state except designated integrated managed care regions	MCO* (Amerigroup, CCW, CHPW, MHW, UHC)	MCO* (Amerigroup, CCW, CHPW, MHW, UHC)	MCO* (Amerigroup, CCW, CHPW, MHW, UHC)	ProviderOne	ProviderOne (see Part II of guide – Specialized Mental Health Services)	ProviderOne	BHO/BH-ASO

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MCO-enrolled client with a BHO (applicable to entire state except designated integrated managed care regions)	MCO* (Amerigroup, CCW, CHPW, MHW, UHC)	MCO* (Amerigroup, CCW, CHPW, MHW, UHC) (effective 7/1/15)	MCO* (Amerigroup, CCW, CHPW, MHW, UHC)	ProviderOne	BHO	Authorized by the BHO and paid through ProviderOne	BHO
FFS Apple Health client with a BHO (applicable to entire state except designated integrated managed care regions)	ProviderOne	ProviderOne	ProviderOne	ProviderOne	BHO	Authorized by the BHO and paid through ProviderOne	BHO
Non-Apple Health eligible person (applicable to entire state except designated integrated managed care regions)	No Payer*	ProviderOne: ITA Admissions ONLY	ProviderOne	ProviderOne: ITA Admissions ONLY	No Payer*	Authorized by the BHO and paid through ProviderOne	BHO

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Designated integrated managed care regions	integrated managed care plan, enrolled client	Applicable MCO*	Applicable MCO*	Applicable MCO*	Applicable MCO*	Applicable MCO*	Applicable MCO* Exception: If patient is a Healthy Options-Blind/Disabled (HOBD) client and admitted to a certified public expenditure (CPE) hospital, bill FFS-ProviderOne	Regional BH-ASO*
	FFS Apple Health client with BHSO	ProviderOne	ProviderOne	ProviderOne	ProviderOne	Applicable BHSO*	Applicable BHSO* Exception: If patient is a Healthy Options-Blind/Disabled (HOBD) client and admitted to a certified public expenditure (CPE) hospital, bill FFS-ProviderOne	Regional BH-ASO*

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Designated integrated managed care plan, regions	Behavioral health for non-Apple Health eligible people	Regional BH-ASO* (Lower-acuity outpatient services for people who are not eligible for Apple Health are optional for the BH-ASO to provide within their available funding)	ProviderOne: ITA Admissions ONLY	Regional BH-ASO*	ProviderOne: ITA Admissions ONLY	Regional BH-ASO* (Voluntary higher-acuity mental health outpatient services for people who are not eligible for Apple Health are optional for the BH-ASO to provide, within their available funding)	Regional BH-ASO* (Voluntary inpatient psychiatric services for people who are not eligible for Apple Health are optional for the BH-ASO to provide, within their available funding)	Regional BH-ASO*

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Foster care	CCW-enrolled client	CCW*	CCW*	CCW*	CCW*	CCW* (Client lives in a designated integrated managed care region) BHO* (Client <u>does not</u> live in a designated integrated managed care region)	CCW* (Client lives in a designated integrated managed care region) BHO* (Client <u>does not</u> live in a designated integrated managed care region) Exception: If patient is a Healthy Options-Blind/Disabled (HOBD) client and admitted to a certified public expenditure (CPE) hospital, bill FFS-ProviderOne	Regional BH-ASO* (Client lives in a designated integrated managed care region) BHO* (Client <u>does not</u> live in a designated integrated managed care region)

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Foster care	FFS Apple Health client enrolled with MCO's Behavioral Health Services Only (BHSO) program (or enrolled with regional BHO in non-integrated managed care region)	ProviderOne	ProviderOne	ProviderOne	ProviderOne	Applicable MCO* (Client lives in a designated integrated managed care region) BHO (Client <u>does not</u> live in a designated integrated managed care region)	Applicable MCO* (Client lives in a designated integrated managed care region) BHO (Client <u>does not</u> live in a designated integrated managed care region) Exception: If patient is a Healthy Options-Blind/Disabled (HOBD) client and admitted to a certified public expenditure (CPE) hospital, bill FFS-ProviderOne	Regional BH-ASO* (Client lives in a designated integrated managed care region) BHO* (Client <u>does not</u> live in a designated integrated managed care region)

