

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202199 NOVEMBER 16, 2021

IHCP clarifies billing requirements for enrolled behavioral health professionals supervising plans of treatment

The Indiana Health Coverage Programs (IHCP) is issuing additional clarification on the policy for reimbursing newly enrolled behavioral health professionals previously announced in *IHCP Bulletin* [BT2020108](#).

The behavioral health professionals listed in *BT2020108* are no longer required to bill their services under a supervising practitioner such as a physician, health service provider in psychology (HSPP) or advanced practice registered nurse (APRN). Instead, they may enroll in the IHCP and bill services directly using their own National Provider Identifier (NPI).



As announced in [BT202137](#), the IHCP implemented *Senate Enrolled Act 82*, which allowed certain licensed behavioral health professionals to certify a diagnosis as well as supervise the plan of treatment (as announced in [BT201943](#)). Therefore, the following enrolled behavioral health professionals may provide supervision, as long as the supervised individual is rendering services appropriate for the individual's scope of work:

- Licensed clinical social worker (LCSW) (type 11, specialty 618)
- Licensed marriage and family therapist (LMFT) (type 11, specialty 619)
- Licensed mental health counselor (LMHC) (type 11, specialty 620)
- Licensed clinical addiction counselor (LCAC) (type 11, specialty 621)

For Medicaid enrollment purposes, beginning **July 1, 2021**, an outpatient mental health clinic (type 11, specialty 110) is no longer required to have an HSPP or physician linked to the group enrollment as long as they have linked one or more rendering providers with any of the above four specialties.

Licensed psychologists (type 11, specialty 616) and licensed independent practice school psychologists (type 11, specialty 617) are still required to have an eligible practitioner certify diagnoses and supervise plans of treatment. These specialties cannot receive reimbursement for supervision of other individuals.

When a behavioral health service is rendered by a nonenrolled practitioner and billed under the NPI of a supervising practitioner, this information must be indicated on the claim using the appropriate modifier. Providers submitting fee-for-service (FFS) claims may use the HE modifier to indicate such supervision.

Physicians and HSPPs are reimbursed at 100% of the allowed IHCP Fee Schedule amount for behavioral health services. All other eligible behavioral health providers are reimbursed at 75% of the allowed fee schedule amount.

Individual managed care entities (MCEs) establish and publish prior authorization (PA), reimbursement and billing information within the managed care delivery system. Questions about managed care guidance should be directed to the MCE with which the member is enrolled.

In addition, the IHCP requests that MCEs identify any claims affected by a double cutback or incorrect reimbursement rate effective **Nov. 1, 2020, to present** for reprocessing.



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