



Use this quick reference guide to help your office identify important information on authorizations, claims and member benefits for behavioral health services. For complete behavioral health billing guidelines, refer to our *Professional Provider Office Manual* found online at [www.BCBSLA.com/providers](http://www.BCBSLA.com/providers) >Resources and our *Member Provider Policy & Procedure Manual* available on iLinkBlue ([www.BCBSLA.com/ilinkblue](http://www.BCBSLA.com/ilinkblue)).

## Networks

Our members must access network behavioral health providers based on the provider network associated with their member benefit plan for in-network benefits. Refer to the chart below for the appropriate provider network for each of our member benefit plans.

Benefit Plan Type	Network
PPO	Preferred Care PPO Network
HMO ( <i>HMO/HMO &amp; HMO/POS</i> )	HMO Louisiana, Inc. Network
Blue Connect	Blue Connect Network
Blue HPN	Blue HPN Network
Community Blue	Community Blue Network
Precision Blue	Precision Blue Network
Signature Blue	Signature Blue Network
Federal Employee Program (FEP)	Preferred Care PPO Network

**Always verify member benefits prior to rendering services.** Patient eligibility, claim status, allowable charges, payment information and medical policies are available online through iLinkBlue ([www.BCBSLA.com/ilinkblue](http://www.BCBSLA.com/ilinkblue)).

## Claims

Behavioral health claims are processed directly by Blue Cross.

### Electronic Claims:

- through your clearinghouse
- through iLinkBlue for CMS-1500 claims only

### Hardcopy Claims:

Blue Cross and Blue Shield of Louisiana  
P.O. Box 98029  
Baton Rouge, LA 70898-9029

## Authorizations

Authorizations are required for all inpatient behavioral health services. Authorizations may be required for some outpatient behavioral health services. Blue Cross has partnered with New Directions to manage the authorization, case and disease management processes for behavioral health services.

### New Directions: 1-800-991-5638

Behavioral health services that require an authorization:

- Applied Behavior Analysis (ABA) (*Providers must submit an initial assessment request and treatment request form on the New Directions WebPass Portal. It can also be used to view the status of all ABA service requests and authorizations.*)
- Inpatient Hospital (including detox)
- Intensive Outpatient Program (IOP)
- Partial Hospitalization Program (PHP)
- Residential Treatment Center (RTC)

For FEP Members at RTCs:

- Facility must be licensed and accredited
- Member must be enrolled in Case Management
- Pre-service approval must be obtained prior to admission (*FEP does not allow review for medical necessity if the member is admitted to RTC prior to requesting authorization*)

Authorization requests may be completed on iLinkBlue. Click on the "Authorizations" menu option, then choose "Behavioral Health Authorizations" to access the New Directions WebPass Portal. Facilities should use this tool to request authorizations for behavioral health services which eliminates telephone time in requesting authorizations.

Access to WebPass Portal must be granted by your organization's administrative representative. Additionally, without access to iLinkBlue, you cannot access WebPass.

## Psychotherapy E&M Codes

- Psychiatrists and psychologists may bill E&M codes, if appropriate for the service provided and licensed to do so.
- Pharmacologic management CPT® code 90863 will bundle as incidental to psychotherapy codes.

## Post-discharge Standards

Discharge planning should include the utilization review staff, discharge planner, the member's family, significant others, guardian or others as desired by the member. Admitting facilities should ensure that patients are provided follow-up appointments within seven days of discharge from an acute inpatient setting with a behavioral health provider. The seven-day appointment does not need to be with a psychiatrist; instead it can be scheduled with a therapist or other behavioral health provider.

New Directions offers post-discharge scheduling, on our behalf, to ensure our members schedule outpatient appointments. Their case managers and care transitions staff call providers to schedule post-discharge appointments within seven days.

To take advantage of this service, contact the **New Directions After-care Follow-up Assistance Line** at:

Phone: 1-877-300-5909

Email: [Louisiana\\_CM@ndbh.com](mailto:Louisiana_CM@ndbh.com)

## Autism Services

We cover the diagnosis and treatment of autism for persons under the age of 21 on most policies. Authorizations are required for ABA Services—all reviews and authorizations related to the diagnosis and treatment of autism are handled by New Directions.

Providers must submit an initial assessment request and treatment request form on the New Directions WebPass Portal, available through iLinkBlue.

*Note: Autism benefits do not apply for some individual policies and may vary for self-funded groups and BlueCard® members. Always verify members' benefits to determine applicable benefits and any maximum benefit limitations, through iLinkBlue.*

For full autism and behavioral health billing guidelines, refer to the *Professional Provider Office Manual*, available online at [www.BCBSLA.com/providers](http://www.BCBSLA.com/providers) >Resources.

## Applied Behavior Analysis (ABA) Modifiers & Billing Guidelines

Provider Type	Billing Guidelines	Modifier
Licensed Behavior Analyst (LBA)	<ul style="list-style-type: none"> <li>• Can bill directly</li> <li>• Services must be billed with modifier</li> </ul>	TG
State-certified Assistant Behavioral Analysts (SCABA)	<ul style="list-style-type: none"> <li>• Cannot bill directly</li> <li>• Services must be billed through the supervising LBA with the appropriate codes and modifier</li> </ul>	TF
Registered Line Therapists (RLT) with a Bachelor's degree	<ul style="list-style-type: none"> <li>• Cannot bill directly</li> <li>• Services must be billed through the supervising LBA</li> </ul>	HN
RLT without a Bachelor's degree	<ul style="list-style-type: none"> <li>• Cannot bill directly</li> <li>• Services must be billed through the supervising LBA</li> </ul>	No modifier

Code	Time	Clinician Type	Modifier
97151	15 min	SCABA	TF
		LBA	TG
97152	15 min	SCABA	TF
		LBA	TG
		RLT without Bachelor's	
97153	15 min	RLT with Bachelor's	HN
		SCABA	TF
		LBA	TG
		RLT without Bachelor's	
97154	15 min	SCABA	TF
		LBA	TG
		RLT without Bachelor's	
97155	15 min	SCABA	TF
		LBA	TG
97156	15 min	SCABA	TF
		LBA	TG
97157	15 min	SCABA	TF
		LBA	TG
97158	15 min	SCABA	TF
		LBA	TG
0362T	15 min	SCABA	TF
		LBA	TG
0373T	15 min	SCABA	TF
		LBA	TG

*Full descriptions for these codes and CPT time-rules are available from the American Medical Association.*