

CBHC QUICK TIPS

For community mental health centers (CMHCs) providing emergency community behavioral health care (CBHC) services for our members



OVERVIEW

As we [previously shared with you](#), consistent with the Division of Insurance guidelines, we will reimburse the following emergency services that are rendered by community mental health centers (CMHCs) that have been designated by the Commonwealth to provide emergency community behavioral health care (CBHC) services.

This is effective for claims with dates of service retroactive to **June 22, 2023**. You do not need to submit prior authorization or provide notification.

REIMBURSEMENT FOR CLAIMS THAT HAVE NOT BEEN SUBMITTED

We will reimburse emergency community behavioral health care services for dates of service retroactive to June 22, 2023 **when billed with the service codes and modifiers in the table below.**

- We will not require prior authorization or notification for these CBHC services.
- Commercial members: copayments will not apply; deductible and co-insurance will apply per the member's benefits.
- Medicare HMO, Medicare PPO, and Federal Employee Program (FEP) members: copayments will apply; deductible and co-insurance will apply per the member's benefits.

Before you submit claims, please wait to receive notification from us that the CBHC services have been added to your contract.

| Service code – Modifier | Description |
|-------------------------|--|
| S9485 – HB | Crisis intervention mental health services, per diem. (Adult/Youth Community Crisis Stabilization per day rate). Crisis intervention mental health services, per diem. (Adult/Youth Mobile Crisis Intervention provided at hospital emergency department, CBHC site, and community-based site of service outside of the CBHC site. Inclusive of initial evaluation and all follow-up intervention.) |
| H2011 – HB | Crisis intervention service, per 15 minutes. (Adult/Youth Mobile Crisis Intervention provided at CBHC site by a Paraprofessional, Bachelor's or Master's level clinician. Follow-up interventions provided up to eight [8] hours or 32 15-minute units.) |

IMPORTANT TIMELY FILING NOTE

For claims that you have not yet submitted that are already past our standard 90-day timely filing limit, we will notify you of a specific window of time, based on your contract's effective date, during which you can still submit these claims.

REIMBURSEMENT FOR PREVIOUSLY SUBMITTED CLAIMS

| If... | And... | Then.... |
|--|--|---|
| You've already submitted claims with dates of service June 22, 2023 or after for CBHC services | You've already been reimbursed at your then-current CMHC rates | Submit a replacement claim within 365 days from the processed date of the original claim, listing the CHBC service(s) with the HB modifier. Important: Do not include additional charges on the replacement claim. |

HELP YOUR PATIENTS FIND MENTAL HEALTH CARE

To help direct your patients in need of affordable and appropriate mental health care, visit our [Provider Central Mental Health page](#). Here, you'll find an overview of all the mental health options, both in-person and virtual, available to our members. This includes groups that offer therapy, medication management, and specialty mental health care.

The page contains detailed steps, screenshots, and a fact sheet that you can share with your patient. The downloadable fact sheet has simple instructions on how to search for mental health care via our member portal, MyBlue, with a QR code linking right to it.

The screenshot shows the Provider Central website interface. The main content area is titled 'Helping Members Find Care' and includes a list of bullet points: 'In-person and telehealth appointments', 'A central intake system for matching and scheduling appointments', and 'A robust directory of varied provider types'. A red box highlights a section titled 'Here's how to help your patients find care' which contains the text: 'Need help directing your patients to the right mental health care quickly and efficiently? We encourage you to point them to our MyBlue Mental Health Options page. It's a tool that streamlines the process of finding a mental health provider for your patients.' Below this, another red box highlights a section titled 'Please share this fact sheet and the below simple steps with your patient:' which includes two numbered steps: '1 Sign into your MyBlue account and click on My Care>Mental Health Options.' and '2 Optional: Answer a brief set of 4-5 questions to assess your specific mental health needs. It can be retaken if needed.' There is also a 'View screenshots' link and an 'Expand All' button.

RESOURCES

[Claim Resubmission Guide \(Frequency Codes 7 & 8\)](#)

[Replacement Claims Provider Central page](#)

[Replacement Claims FAQs](#)

[Quick Tip: Checking Claim Status](#)

[Timely Filing Guidelines](#)

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