

Behavioral Health

Quick-Reference Guide

General Information

Department of Alcohol and Other Drug Abuse Services (DAODAS):

Services provided by DAODAS are part of the managed care organization-covered (MCO-covered) responsibilities. All services provided by DAODAS providers require prior authorization.

For First Choice by Select Health of South Carolina members, providers are required to contact Select Health to request prior authorization before rendering services. Claims for these services will be submitted directly to Select Health.

Outpatient Behavioral Health Services

Effective May 1, 2022, Select Health requires a medical necessity review once the member has reached 24 individual psychotherapy visits (any combination of 90832, 90834, and 90837) per state fiscal year, July 1 through June 30. The limit of six visits per month still applies. Prior authorization requirements for all other codes remains the same.

Effective July 1, 2023, the count of 24 visits runs through June 30. The visit count will start over with the new fiscal year. The limit of six visits per month will still apply.

The medical necessity review post 24 visits does not apply for children and youth in foster care or to members being treated by the Department of Mental Health (DMH) or the Medical University of South Carolina (MUSC).

Rehabilitative Behavioral Health Services (RBHS)

RBHS includes the following categories:

- **Behavior modification** — a system of treatment that provides members with redirection and modeling of appropriate behaviors in order to enhance function in the home and/or community.
- **Psychosocial rehabilitative services** — psychosocial skill-building services; not a form of psychotherapy or counseling.

- **Family support services** — enable the family or caregiver to be an engaged member of the treatment team and/or improve their ability to care for the member.
- **Community integration services** — targeted treatment services for adults 18 years old and older with serious and persistent mental illness.
- **Therapeutic child care** — targeted treatment services for children under 6 years old who have experienced trauma, neglect, and abuse and need early intervention.

Effective July 01, 2022, Child-Parent Psychotherapy (CPP) was added as an approved evidence-based practice (EBP) used in therapeutic child care (TCC). CPP is an intervention model for children 0 – 6 years of age who have experienced at least one traumatic event and/or are experiencing mental health, attachment, and/or behavioral problems.

This benefit also includes services rendered by state and other public agencies that previously did not participate in the Select Health provider network. These include such providers as the Department of Mental Health (DMH) and the Department of Education (DOE).

Autism Spectrum Disorder (ASD) Services

ASD services are a covered benefit under the Select Health plan for members under 21 years of age.

This benefit includes ASD services rendered by Licensed Independent Practitioners (LIPs) who are approved by South Carolina Department of Health and Human Services (SCDHHS) to provide evidence-based treatment (an applied behavior analysis alternative therapy modality); Board Certified Behavior Analysts; and Board Certified Assistant Behavior Analysts.

The following LIPs are permitted to render ASD services for Select Health members once approved and registered with SCDHHS and Select Health:



Select Health
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Healthy Connections 

- Licensed Independent Practitioners (LIPs) — master’s or doctoral:
 - Licensed Psychologist.
 - Licensed Psycho-Educational Specialist (LPES).
 - Licensed Independent Social Worker-Clinical Practice (LISW-CP).
 - Licensed Marriage and Family Therapist (LMFT).
 - Licensed Professional Counselor (LPC).

ASD services may also be rendered by school districts that enroll with SCDHHS as ASD group providers.

Psychiatric Residential Treatment Facility (PRTF) Services

Select Health provides coverage for services rendered at a PRTF for eligible members. This benefit includes psychiatric care provided to children under age 21. If services are provided immediately before the member reaches age 21, services may continue until the member no longer requires the services or the date the member reaches age 22.

Members are referred for PRTF services by a Licensed Practitioner of the Healing Arts (LPHA) via the completion of the [PRTF Treatment Request Form](#). The PRTF Referral Form can be completed by the admitting facility, current treatment provider, or referral source. For questions regarding a member who is receiving PRTF services, please contact Select Health Behavioral Health Utilization Management at **1-866-341-8765** and ask to speak to a licensed clinician regarding PRTF placement.

Services That Require Prior Authorization

- Individual psychotherapy visits (any combination of 90832, 90834, and 90837) after the first 24 visits per state fiscal year, July 1 through June 30. (Limit: six visits per month.)
- All inpatient psychiatric care (including PRTFs).
- Inpatient detoxification or rehab substance use care.
- All services provided by DAODAS providers.
- All ASD services.
- Electroconvulsive therapy (ECT), inpatient or outpatient.
- Psychological or neuropsychological testing.
- Environmental intervention medication management (specific CPT code 90882).
- Interpretation or explanation of results (specific CPT code 90887).
- Unlisted psychiatric service or procedure (specific CPT code 90899).

- Crisis intervention (specific CPT code H2011): Notification is required (within two business days) post-service. Medical necessity review is required after 80 units per state fiscal year (July 1 – June 30).

Authorizations for services are based on medical necessity.

Nonparticipating Providers

Members should be referred to an in-network provider, or the provider should contract with the health plan.

All services provided by nonparticipating providers require prior authorization.

Claims Submission Guidelines

- Submit claims on the CMS 1500 claim form for all services with the exception of PRTF. PRTF claims are submitted on a UB-04 claim form.
- Include correct and current practitioner or facility information, including National Provider Identifier and the Select Health Provider Identification Number.
- Include correct and current member information, including the Healthy Connections ID number or First Choice member ID, on all claims.
- Submit original claims and claims with corrections within 365 calendar days from the date services were rendered.
- Use standard CPT coding, not “T” codes, for RHC and FQHC provider claims.

Important numbers

Member Services:
1-888-276-2020
Behavioral Health
Utilization Management
Prior Authorization:
1-866-341-8765 (phone)
1-888-796-5521 (fax)

Claims questions?

Please call
1-800-575-0418.

Mailing address for claim forms

Select Health of South Carolina
Claims Processing Department
P.O. Box 7120
London, KY 40742

Coding tips

For outpatient behavioral health when billing a 90832/4/7 and a 90846/90847/90853 on the same date of service, in addition to the AH or HO modifier, a 59 modifier must be used on the 90832/4/7 to identify it as a separate procedure.

Copays

There are no copays or deductibles for members receiving behavioral health services.

Note: By accepting assignment, you have agreed to accept the First Choice/Medicaid payment as payment in full. Providers cannot balance-bill First Choice members.

	Precertification required	Authorization required	How to get authorization
Inpatient psychiatric care	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521
Inpatient detoxification or rehab substance use care	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521
ECT, inpatient or outpatient	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521 or submit online through NaviNet.
Psychological or neuropsychological testing	Yes	Yes	Fax: 1-888-796-5521 or submit online through NaviNet.
Outpatient psychiatric or mental health	Individual psychotherapy codes after the 24th visit, (any combination of 90832, 90834, 90837). Nonparticipating providers require prior authorization for all services.	Yes	Submit online through NaviNet.
DAODAS	Yes	Yes	Fax: 1-888-796-5521
ASD services	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521 or submit online through NaviNet.
PRTF services	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521
RBHS services	Yes	Yes	Phone: 1-866-341-8765 Fax: 1-888-796-5521

Inpatient and ECT

- Call a behavioral health clinical care manager at **1-866-341-8765**.
- Emergency inpatient hospital admissions are handled 24 hours a day, seven days a week.
- ECT requests are handled telephonically during regular business hours, Monday – Friday, 8:30 a.m. – 4:30 p.m.

Psychological Testing and Neuropsychological Testing Require Preauthorization

- Submit requests using the Select Health Psychological Testing Request Form.
- Visit the Select Health website (www.selecthealthofsc.com) or call during regular business hours to have the form emailed to you.
- Go to www.navinet.navimedix.com to submit a request online.

Initial and Ongoing Outpatient Services (Mental Health and Substance Use, Non-DAODAS):

- Individual psychotherapy codes after the 24th visit, (any combination of 90832, 90834, 90837).
- All services by nonparticipating providers require prior authorization.

DAODAS

All services require prior authorization.

ASD

- Submit requests using the Select Health ASD Treatment Request Form.
- Visit the Select Health website, or call during business hours to have the form emailed to you.
- Go to www.navinet.navimedix.com to submit a request online.

PRTF

- Submit requests using the Select Health PRTF Treatment Request Form.
- Visit the Select Health website, or call during regular business hours to have the form emailed to you.

RBHS

- Submit requests using the Select Health Private RBHS Treatment Request Form.
- Visit the Select Health website, or call during business hours to have the form emailed to you.
- Go to www.navinet.navimedix.com to submit a request online.

Note: Submission of your requests through NaviNet may improve processing time. However, the applicable treatment request form must still be completed and uploaded to the online system or faxed to Behavioral Health Utilization Management.



Healthy Connections 

www.selecthealthofsc.com