

# Behavioral Health Services Only enrollment

## What is Behavioral Health Services Only (BHSO) coverage?

Behavioral Health Services Only (BHSO) enrollment is for Apple Health clients who are not eligible for medical managed care plans (such as those with Medicare as primary insurance). BHSO enrollment ensures everyone who is eligible has access to behavioral health benefits. Through BHSO, clients get coverage for their specialty behavioral health care (mental health and substance use disorder treatment).

Certain behavioral health services are funded by the Washington State Legislature (outside of Apple Health) or by federal grants. These services complement Apple Health benefits and may be available to BHSO-covered Apple Health clients who meet specific program and medical necessity criteria.

## Who will be enrolled in BHSO coverage?

HCA will automatically enroll clients in BHSO coverage when a person is eligible for behavioral health services under Apple Health but receives their physical health coverage outside the managed medical care program. This includes:

- Individuals with primary insurance through Medicare (traditional or Part C).
- Individuals in foster care who receive their medical care through Apple Health without a managed care plan (also known as fee-for-service).
- Certain individuals who have private insurance coverage.

Note: Dual-eligible American Indian/Alaska Native (AI/AN) clients may opt in or out of BHSO coverage at any time.

## How are clients enrolled in BHSO coverage?

Apple Health clients who are **not** enrolled in an Apple Health managed care plan but are eligible for BHSO benefits will be automatically enrolled into BHSO with one of the available managed care organizations.

## How do clients change their BHSO plan?

Clients can change their plan at any time. Depending on when they make a request, their new plan will usually start the first of the next month.

There are several ways to change their plan:

- ProviderOne client portal: [waproviderone.org/client](http://waproviderone.org/client)
- Call: Apple Health Customer Service at 1-800-562-3022 (TRS:711)
- Online: <https://fortress.wa.gov/hca/p1contactus>

## How is managed care enrollment for BHSO different from the Behavioral Health Organizations?

The coverage provided under BHSO is the same coverage provided to individuals who received care through a behavioral health organization (BHO), prior to implementation of integrated managed care. The main difference is that the BHSO enrollees are in the managed care plans that operate integrated managed care. This means clients with BHSO will have access to the same behavioral health provider networks as clients in managed care.



## What services are covered under BHSO

### Mental health outpatient treatment

- Intake evaluation
- Individual treatment services
- Medication management
- Medication monitoring
- Group treatment services
- Peer support
- Brief intervention and treatment
- Family treatment
- High intensity treatment
- Therapeutic psychoeducation
- Day support
- Stabilization services
- Rehabilitation case management
- Mental health services provided in a residential setting
- Special population evaluation
- Psychological assessment

### Medically necessary inpatient crisis care

- Evaluation
- Treatment
- Community hospitalization

### Substance use disorder treatment services

- Assessment
- Brief intervention and referral to treatment
- Withdrawal management (detoxification)
- Outpatient treatment
- Intensive outpatient treatment
- Inpatient residential treatment
- Opiate substitution treatment services
- Case management

## How does a provider verify a client's enrollment in BHSO?

There are two steps to verifying a client's BHSO enrollment in ProviderOne:

- Under client Eligibility Spans, check the client's type of coverage, or Benefit Service Package. It must include CNP or ABP.
- Under Managed Care Information, check which plan covers their benefits, listed in the Plan/PCCM Name column (e.g., "[Plan Name] Behavioral Health Services Only").

For example: A dual eligible who is categorically needy and has "MHC Behavioral Health Services Only" in the managed care screen will receive their physical health benefits from Medicare (with Apple Health as secondary, using the QMB benefit to pay Part A and Part B cost-sharing on a FFS basis), with their behavioral health benefits from Molina's BHSO coverage.