



## Important Behavioral Health Services Changes Effective October 1, 2015

Currently, certain Behavioral Health (BH) benefits are paid Fee for Service (FFS) for managed care enrollees if they meet the condition of Medicaid categorization as SSI or SSI related or for individuals who require services that were previously carved out of Medicaid managed care (MMC). Effective October 1, 2015 Behavioral Health services will be transitioned into the benefit package for Mainstream managed care plans for adults (21 years of age and older) in New York City, requiring these (BH) provider claims be billed to the managed care plan. Commencing July 1, 2016 adults in the Rest of State will transition.

While the State has made many system modifications to support this transition, system configurations continue to be made. Mainly, eligibility verification of NYC Adults will incorrectly respond "**Mental Health**" carve-out for SSI consumers until all system changes are completed. This response should not deter providers from billing the MMC plans for BH covered services beginning 10/1/15. On 10/1/15, providers are required to bill the MMC plan for these services if provided after the implementation date. Until the system changes are complete, providers in NYC who inappropriately bill Medicaid FFS for BH services for MMC enrollees, may have their claim pay instead of denying. Please note that the Department of Health (DOH) will conduct a review of Behavioral Health FFS payments to identify any incorrect payments made after the BH transition implementation date. All inappropriate payments will be recovered by DOH.

Provider questions should be directed to the Provider Hotline at 1-800-343-9000.