

A woman is shown from the chest up, facing right. Her face, neck, and arms are covered in vibrant, multi-colored body paint in shades of pink, purple, blue, and yellow. She is wearing a large, white, multi-petaled flower-shaped earring. Her right hand is wearing a bright red glove. The background is a solid, deep blue color.

Behavioral Health


CareSource[®]

2024 IHCP Works Annual
Seminar



Agenda

- Meet the CareSource Team
- Applied Behavior Analysis (ABA)
- Code Sets by Specialty Types
- Credentialing
- Prior Authorization Forms
- Claim Recoupments and Adjustments
- Better Doctor Attestation
- Tobacco Cessation
- Purdue Farm Stress
- Coordination of Care & Release of Information
- Links for Guidance
- Contact Information



Amanda Denny, Behavioral Health Resolution Specialist – Northern Indiana



Stephanie Gates, Behavioral Health Resolution Specialist – Southern Indiana

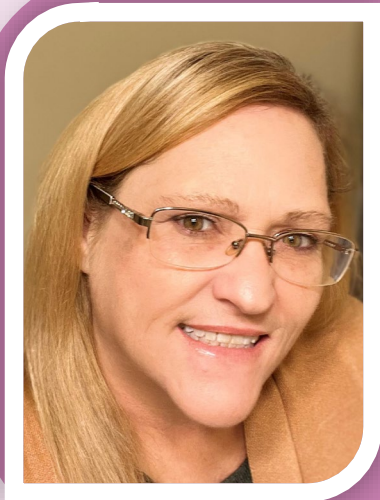
Meet the CareSource Team
Behavioral Health - Health
Partner Northern Indiana

We are your Behavioral Health Resolution Specialist. We are your first point of contact to help with all your revenue, billing and credentialing needs.





Amanda Denny, Behavioral Health Resolution Specialist – Northern Indiana



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Kristi Carney, MSW, LSW, CCM,
Behavioral Health Director

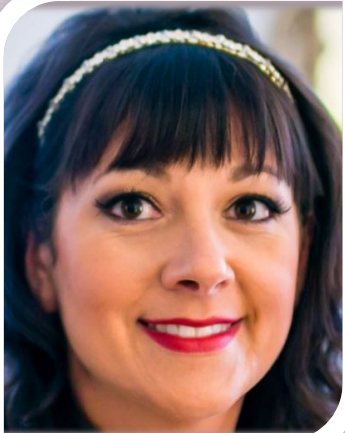


Brittany Burtraw, Manager
Behavioral Health Initiative Team –
Southern Indiana

Meet the CareSource Team
Behavioral Health Initiative
Team

We are your Behavioral Initiative Team. We are here to assist with programs and resources.





Kristi Carney, MSW, LSW, CCM,
Behavioral Health Director



Brittany Burtraw, Manager
Behavioral Health Initiative Team –
Southern Indiana

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Behavioral Health Initiative
Team Southern Indiana

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Gayle Smith, Behavioral Health Initiative Lead III – Northern Indiana



Emma Dartis, Behavioral Health Initiative Lead III – Central Indiana

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Gayle Smith, Behavioral Health
Initiative Lead III – Northern Indiana



Emma Dartis, Behavioral Health
Initiative Lead III – Central Indiana

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Behavioral Health Initiative
Team Central Region

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Initiative Team. We are here
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Applied Behavior Analysis Therapy

ABA

ABA Updates

- CareSource is still closed for the ABA specialty. However, we also understand there are certain counties where our members are affected with long wait lists and additional needs. CareSource may consider approving new ABA groups on a case-by-case basis depending on our members needs in that area.
- If you are still receiving denials for 97153 and 97155, this has been corrected and a mass adjudication was completed June 2024. Please reach out to Amanda Denny or Stephanie Gates for assistance.



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Code Sets By Specialty Type

Substance Use Disorder (SUD)

Behavioral Health Reference Module:

- Reminder when billing SUD services, provider type 11/836 can only bill for H0010 and H2034. All other services need to be billed by another specialty type. Please refer to the following link for additional information.

[behavioral-health-services.pdf \(in.gov\)](https://www.in.gov/behavioral-health-services.pdf)

- Please refer to table 4 Covered Procedure Codes for Substance Use Disorder (SUD) Residential Addiction Treatment Facilities (Specialty 836)-

[Behavioral Health Codes \(indianamedicaid.com\)](https://www.in.gov/behavioral-health-codes)



Advance Practice Providers

- Please remember to refer to table 1 under Section 2: Outpatient Behavioral Health Services for Advance Practice Providers who can enroll and supervise treatment.
- Advance Practice Providers are reimbursed at 75% of the allowed Medicaid fee schedule amount.
- Behavioral Health Services Module
 - [behavioral-health-services.pdf \(in.gov\)](#)
 - The link to the codes set for specialty 616-621 can be located by the following this link and reviewing table 1: [Behavioral Health Codes \(indianamedicaid.com\)](#)

[BT2023173 \(in.gov\)](#)

- IHCP Covers Mobile Crisis Intervention services retroactive to July 1, 2023

[BT202430 \(in.gov\)](#)

- IHCP announces provider specialty for mobile crisis units

Mobile Crisis Units have been designated provider type 11/622. Mobile crisis units will be required to enroll as a **group provider classification** with at least one of the following rendering providers associated with the enrollment:

- Type 09 – Advanced Practice Registered Nurse
- Type 11 – Behavioral Health Provider
 - Specialty 618 – Licensed Clinical Social Worker (LCSW)
 - Specialty 619 – Licensed Marriage and Family Therapist (LMFT)
 - Specialty 620 – Licensed Mental Health Counselor (LMHC)
 - Specialty 621 – Licensed Clinical Addiction Counselor (LCAC) Type 31 – Physician

Mobile Crisis

[BT202364 \(in.gov\)](#) - IHCP adding coverage for mobile crisis intervention services. Bulletin update regarding code set.

Table 1 - lists the codes allowed for mobile crisis for specialty 622. Additionally, the Crisis Intervention Services in Table 1 will be reimbursable when rendered by an IHCP-enrolled community mental health center (provider type 11, specialty 111) with a DMHA designation as a mobile crisis unit.

Code Set: [Behavioral Health Codes \(indianamedicaid.com\)](#)

Table 2 - Covered Procedure Codes for Mobile Crisis Units (Specialty 622)

Mobile Crisis - Continued



Credentialing

- Please ensure the practitioner and provider group are enrolled with IHCP Medicaid. Please also ensure the practitioner is linked to each service location with IHCP Medicaid. Refer to the following link detailing the process for IHCP provider enrollment. [Provider Enrollment \(in.gov\)](#)
- Credentialing and Revalidation is important and must be completed with Indiana Medicaid and the MCE.

Credentialing - CareSource

- For CareSource, please refer to the following link: [in-hip-hhw-health-partner-manual.pdf \(caresource.com\)](https://caresource.com/in-hip-hhw-health-partner-manual.pdf)
 - Ensure the CAQH record has been updated.
 - Debarment form is completed in its entirety.
 - Current W9 is submitted with the credentialing request.
 - If the provider type requires an organization application, please ensure this is completed and submitted with the request.
- Please make sure office contact information (email, phone number etc.) is accurate and that you are responding to additional outreach from our credentialing team.



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Prior Authorization Forms

Prior Authorizations

- SUD Residential initial requests should be submitted for **14 days** and concurrent requests should be submitted in increments of **7 days**.
- Please make sure **ALL** clinicals are submitted for each PA request.
- Please make sure **ALL** ASAM dimensions have clinical documentation to support the boxes checked.
- Requesting provider submitted on the IHCP universal form or the IHCP SUD PA Form should be the one who will be providing the services.
 - If the facility is providing services, then the facility's name should be the requesting provider.
 - If the practitioner is providing services, then the practitioner's name should be the requesting provider.





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Claim Recoupments and Adjustments

Claims Recoupment and Adjustment Reasons

- Network notification
- Recoupment letters
- 277U IHCP Companion Guide
 - Encounter rejections
 - [277U IHCP Companion Guide \(in.gov\)](#) page 10
- Front end rejections
 - [837P - IHCP Companion Guide \(in.gov\)](#) page 10
 - 1:1 Match
 - Zip + 4
 - NPI
 - Taxonomy
 - Rendering provider not linked to service location
 - Incorrect information in box 33



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Better Doctor Attestation

Better Doctor Attestation



State and Federal regulations require Health Plans to validate, and update published information regarding their contracted provider network every **90** days. This validation ensures we have the most accurate information for claims payment and provider directories. This information is critical to process your claims. In addition, it ensures our Provider Directories are up to date and reduces unnecessary calls to your practice. This information is also reportable to Medicaid and Medicare. Providers are required to attest to directory information every **90** days.

Better Doctor is the vendor for our provider directory information attestation. Please respond to their inquiries and letters to ensure CareSource is compliant, and our provider directory is updated for our members.

[BetterDoctor: Provider Data Verification & Validation Solution \(questanalytics.com\)](https://questanalytics.com)





Tobacco Cessation Statistics

In the 2021 Annual Report of America's Health Rankings, the *State of Indiana ranks 45 out of 50*, with regards to tobacco use when looking at the healthiest state to reside in the country. According to The Indiana Department of Health Tobacco Prevention and Cessation's State Fiscal Year 2021 Report:

- Indiana ranks among the top 10 states in adult smoking
- Nearly 39% of Indiana adults who smoke have some type of mental health diagnosis

Nationwide, smoking prevalence remains significantly higher among individuals with mental illness and SUDs than those without these conditions. Furthermore,

- About one in five adults in the United States (19.9%) and in Indiana (22.3%) have a mental illness.
- Individuals with mental illness or SUD smoke nearly 40% of all cigarettes smoked in the United States.
- In 2018, on average, less than 60% of MH and SUD treatment facilities screened patients for tobacco use.
- Hoosier adults who are making more than \$75,000 per year smoked at a significantly lower rate than those with lower income level.
- Research suggests that it takes seven to 10 times to successfully quit smoking or using tobacco.

Tobacco Cessation Program

- For tobacco cessation assistance, contact the Indiana Tobacco Quitline at **1-800-QUIT NOW** (1-800-784-8669) or go to <http://www.quitnowindiana.com>.
- Tobacco Cessation Webinar with a Behavioral Health Focus – Posted on CareSource Website
[Training & Events | Indiana – Medicaid | CareSource](#)
- To support our providers in helping Hoosiers quit smoking, CareSource is offering a monetary incentive to eligible providers for qualifying services. Please refer to the [Tobacco Dependence Counseling Provider Incentive](#) network notification for additional information.
- Access the Tobacco Cessation Toolkit [here](#).





Purdue Farm Stress

The Purdue Extension Farm Stress Team https://extension.purdue.edu/farm_stress/, in partnership with UW-Green Bay's Behavioral Health Training Partnership, is offering a FREE self-paced training course, with five (5) continuing education credits available, for mental health and health care providers to learn how to best serve the farming community. For more information and how to register, go to the [Purdue Health Professionals website](#). This project is funded by U.S. Department of Agriculture– NIFA. [Training & Events | Indiana – Medicaid | CareSource](#)



FARM STRESS TEAM

GAIN CULTURAL INSIGHT FOR SERVING FARMERS from agricultural field experts in **this SELF-PACED ONLINE COURSE** made for mental health providers.

Five continuing education credits (CEUs) available.

MADE AVAILABLE IN PARTNERSHIP WITH:





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Coordination of Care & Release of Information



Releasing Member Information

- Providers should obtain signed consent from members to share health information with other providers involved in their care.
- Providers should obtain consent from members to share information with the member's managed care entity.
- CareSource has a HIPAA consent form available for members to complete which helps us coordinate care for and on behalf of members
- The HIPAA Consent Form can be found on our website, www.caresource.com.

Coordination of Care Form



Behavioral Health and Primary Care Provider Coordination of Care Form

The coordination of physical and behavioral health care among treating providers is essential for safe and effective care. Please complete applicable sections of this document and include signed consent for releasing information, as appropriate.

Patient name:		Date:
Medicaid/Marketplace/Medicare ID:		Date of Birth:
Behavioral Health Provider	Physical Healthcare Provider	
Address:	Address:	
Phone:	Phone:	
Fax:	Fax:	

Dear Colleague:

I am treating the member for the following diagnosis(es): _____

The member is engaged in the following intervention(s): Psychotherapy Medication Management
 Other (specify) _____

Frequency of intervention(s): _____

Lab Tests: CBC Thyroid Studies EKG Lipid Profile Serum drug level (specify drug) _____

Medications prescribed (or attach list)

Medication	Dose	Frequency

Member Refused Medication

Adherence to Medications: Most of the time Half of the time Less than half Never No information

Adherence to Appointments: Most of the time Half of the time Less than half Never No information

Response to Treatment: Improving with treatment Stable with treatment Not improving No information

Coordination of care issues or other significant information affecting medical or behavioral health care:

Provider signature: _____ Date: _____

CareSource has Case Managers available to assist with coordination of care. Please return a copy of this form via fax to (937) 396-3964 or email Indiana_BH@caresource.com and a Case Manager will assist with care coordination efforts.

Please check if you DO NOT want the following protected health information released:

Substance Abuse HIV/AIDS

This authorization will expire on _____. I authorize the use and/or disclosure of my protected health information as described above. I understand this authorization for release of protected health information is made to confirm my wishes. I understand that I may revoke this authorization at any time by giving written notice to the person or organization that is authorized above to release information. My health care provided by _____ will not be affected if I do not sign this form. The information disclosed by this release may be re-disclosed by the recipient and may no longer be protected.

Patient Signature: _____

Date: _____



Links for Guidance

IHCP Website:

[Indiana Medicaid: Providers: Provider References](#)

[IHCP Fee Schedules - Copyright Agreement
\(indianamedicaid.com\)](#)

CareSource Website:

[Provider Manual | Indiana – Medicaid | CareSource](#)

[CareSource | Procedure Code Lookup](#)

[Quick Reference Materials | Indiana – Medicaid |
CareSource](#)

[Tools & Resources | Indiana – Medicaid |
CareSource](#)

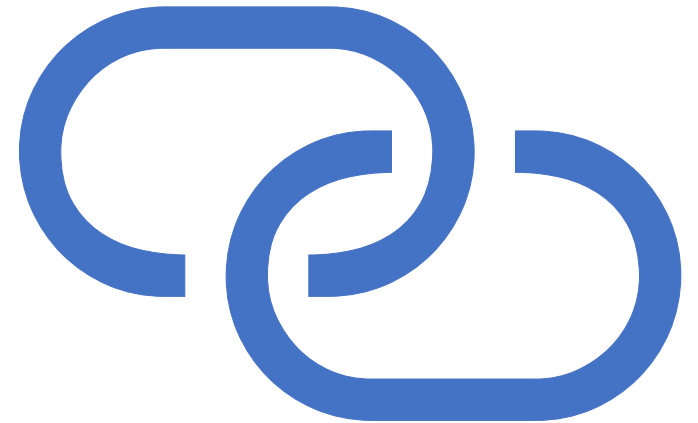
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Health Partner Provider Inbox:
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Territory Map

Behavioral Health - Health Partners

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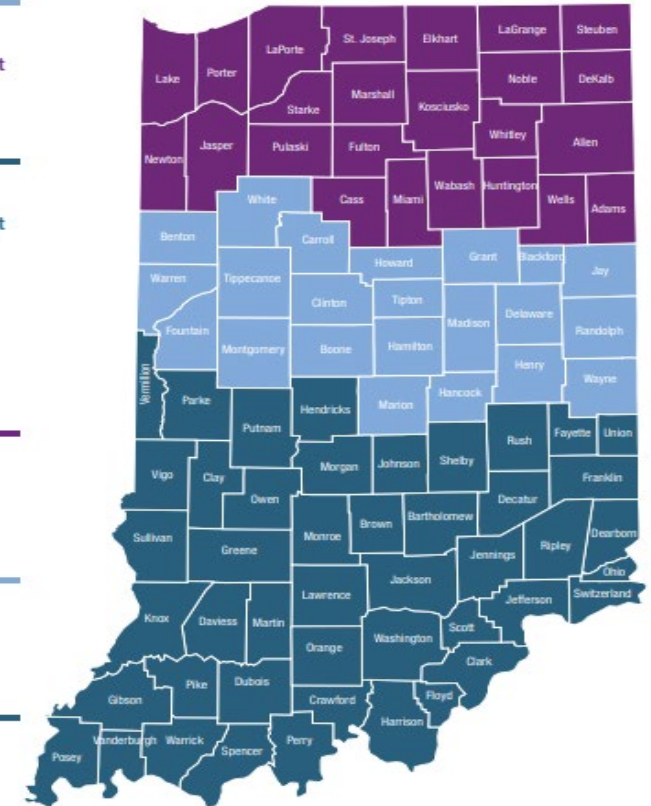
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Health Partner Engagement Representatives – Regional Specialist

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Franciscan Alliance, Fresenius (Statewide)

Amy Wasson

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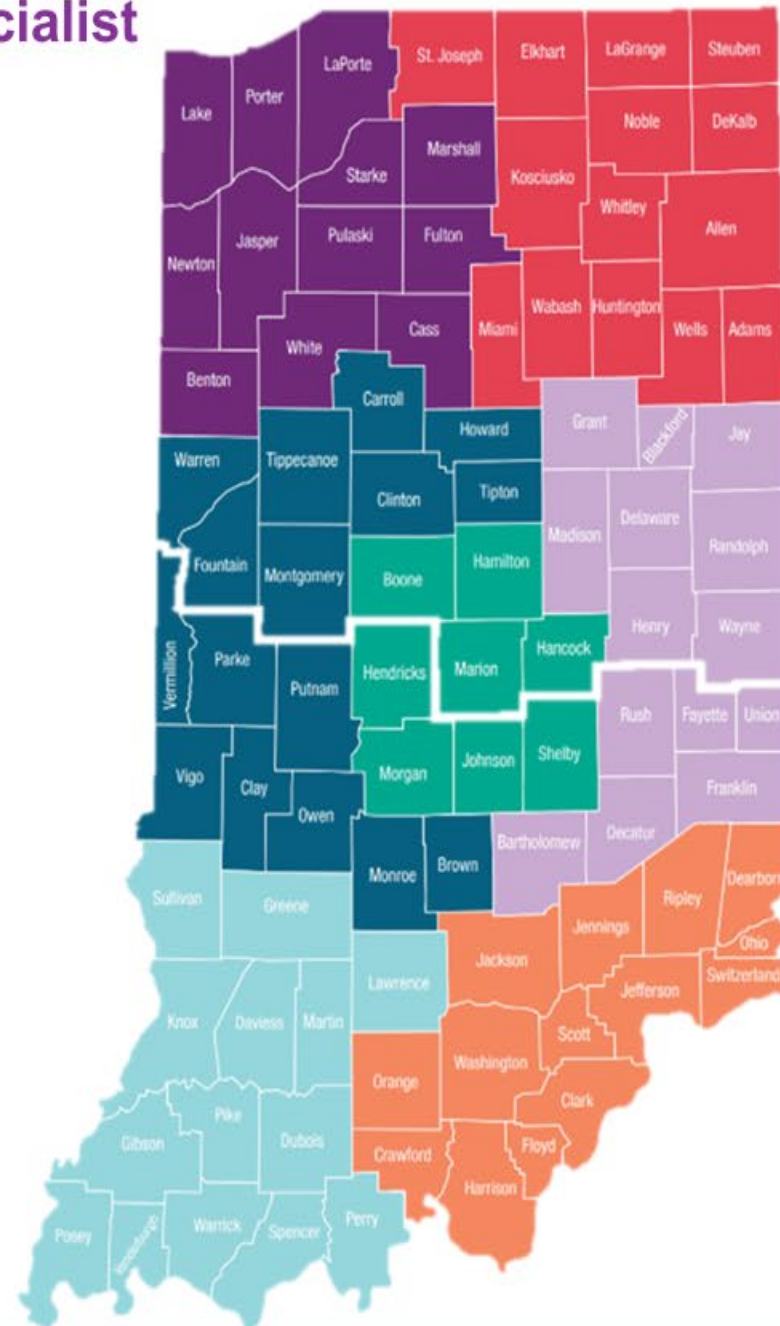
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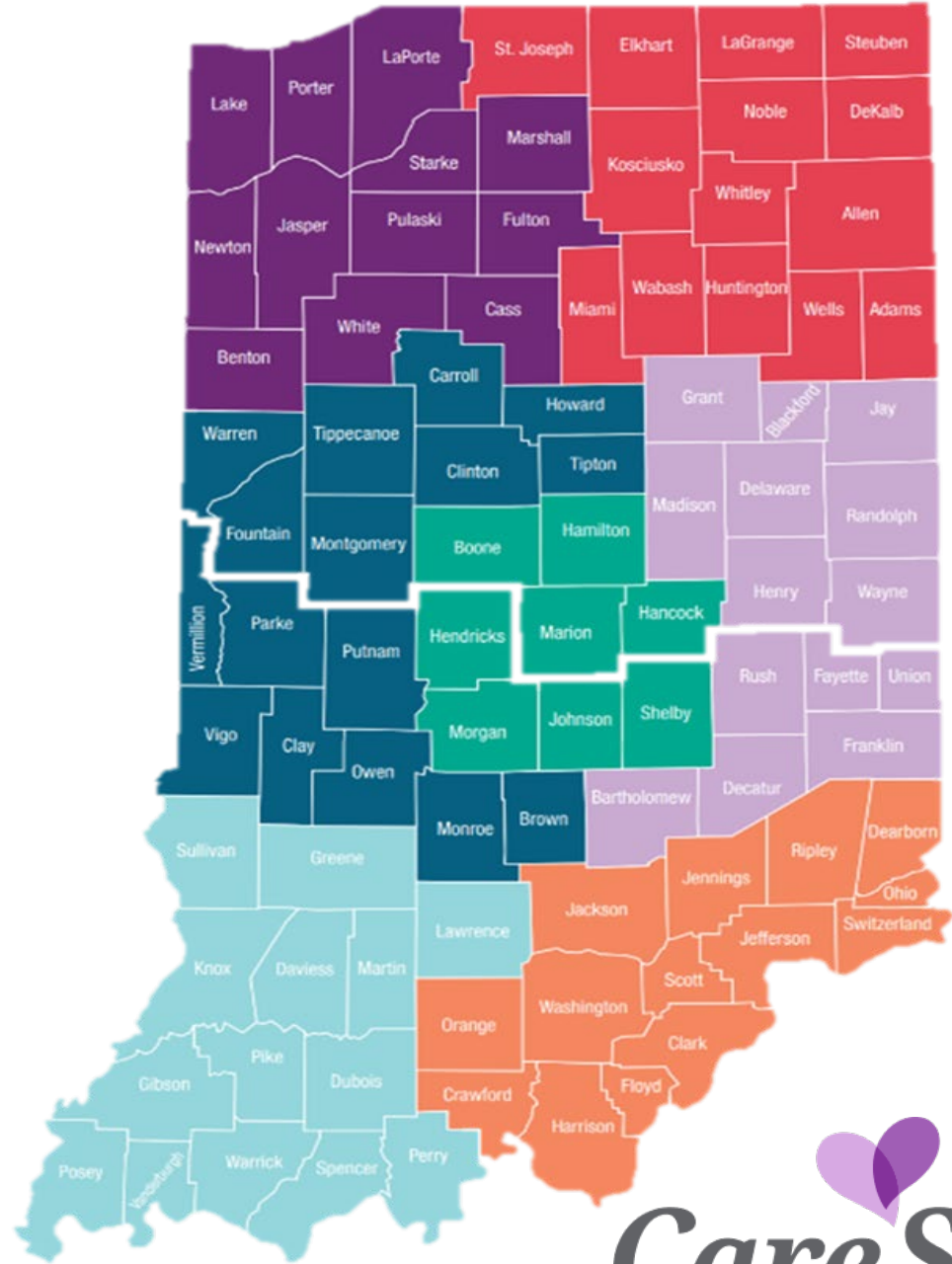
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Thank you!