

# Behavioral Health Individual and Family Therapy Authorization Update Notification

**Summary of Change:** Effective March 1, 2021, all Colorado Community Health Alliance (CCHA) members will have access to up to 20 sessions of individual and/or family therapy sessions during a calendar year before preauthorization is required.

## Why is this Change Necessary?

CCHA is committed to ensuring our members receive high-quality, clinically appropriate services, in the least restrictive environment. This includes employing mechanisms that allow us to efficiently review and assist with guaranteeing proper access to the variety of available behavioral health continuum services, as clinically indicated.

## What is the Impact of This Change?

Beginning March 1, 2021, once a member has exhausted 20 units of any combination of individual and/or family therapy, all additional sessions during the calendar year will require the provider to follow the preauthorization process. Please note:

- The affected CPT<sup>®</sup> codes are 90832, 90834, 90837, 90846 and 90847.
- The requesting or servicing provider must submit all preauthorization requests with supporting clinical documentation through one of the following options:
  - Online via the Interactive Care Reviewer tool at Availity.com > select Patient Registration > Authorizations & Referrals > Authorizations. This method of submission significantly decreases the processing time of the request.
  - Outpatient fax: **1-844-442-8015**
  - Phone: **1-855-627-4685**
- Preferred clinical documentation requirements can be found on the *Behavioral Health Outpatient Form* located on the CCHA website: For Providers > Provider Resources & Training > CCHA Resources & Support for Providers > Behavioral Health Providers > Utilization Management.
- If the request for continuation of services is denied, an appeal may be submitted within 60 days of the denial notification. Appeals can be submitted through one of the following options:
  - Fax: **1-844-452-8067**
  - o Phone: 1-855-627-4685; State Relay 711 for callers with speech or hearing disabilities
  - Mail: Colorado Community Health Alliance (CCHA)
    - P.O. Box 62429

### Virginia Beach, VA 23466-2429

• Failure to follow this process may result in an adverse decision after the 20th session in a calendar year.

### What if I Need Assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations representative, call Provider Services at **1-800-627-4685** or email CCHA.BH.Outpatient@CCHAcares.com.