



## BEHAVIORAL HEALTH SYSTEMS

# BHS Provider Guide

### Welcome to BHS!

We are pleased that you have chosen to join the Behavioral Health Systems (BHS) provider network. Please take a few minutes to read through this information to familiarize yourself with BHS.

We encourage our covered members to contact our office prior to receiving behavioral health services. Speaking directly with the member allows us to perform our intake process, verify the member's eligibility, and explain plan benefits including any applicable cost-sharing. Once we have verified eligibility and coverage, we will contact you to facilitate the referral and provide you with copay, coinsurance, plan deductibles, and any additional benefit information you may need. We will also answer any questions you may have.

### Emergencies

In an emergency, patient safety is the highest priority. Should a BHS patient in crisis call you or present to your office, we would ask that you provide any appropriate and necessary care the patient needs. This may include referral to the nearest hospital emergency department. You or the patient should contact BHS as soon as possible after emergency care has been provided to advise us of the patient's condition.

### Authorization Procedures

BHS preauthorization is not required to initiate standard outpatient office-based treatment such as initial assessment, psychotherapy and psychiatric evaluation and management services.

If you would like a courtesy approval of benefits after your initial assessment of the patient, you may forward a completed BHS assessment and treatment plan form to our Clinical Services Division by fax or mail. BHS will send you written notification of coverage for continued treatment. BHS' clinical forms are available at [www.behavioralhealthsystems.com](http://www.behavioralhealthsystems.com).

Certain outpatient services typically require preauthorization. These include psychological test batteries (more than 10 test hours), Transcranial Magnetic Stimulation (TMS), Electroconvulsive Therapy (ECT), and Intensive Outpatient Programs. Contact BHS if your recommended treatment plan includes any of these treatment services or you would like to confirm whether preauthorization is required for a particular type or intensity of service. Our preauthorization forms can be found at [www.behavioralhealthsystems.com](http://www.behavioralhealthsystems.com).

### Claims Processing

Claims should be submitted to us using a CMS-1500 or UB-04 form as applicable. Since claim filing limits may vary for the benefit plans BHS administers, we ask that all claims be submitted to us within 90 days of the date of service. Please

be aware BHS cannot approve your claim if it is received after a plan filing limit, and a BHS member cannot be held responsible for the charges.

BHS utilizes a monthly "batch" claims process. Valid claims which are received and approved by the 25th day of the month will be paid at the end of the following month. To ensure you receive timely payment, be sure your claim information is complete and accurate, and the claim is sent to BHS promptly. We encourage you to submit claims electronically using **BHS payor ID 63100**. Should you experience any problems or have questions regarding electronic claim submissions to BHS, contact your practice management system vendor, or call Change Healthcare at 800-845-6592. If you prefer, paper claims can be sent to BHS' mailing address shown below, or to the following dedicated **claims fax number: 205-449-5505**. BHS does not accept claims submitted by email.

### Patient Cost-sharing

Patient cost-sharing will vary depending on the benefit plan and type of service provided. The BHS Care Coordinator is available to discuss copay, coinsurance and/or deductible amounts with you. Also, you will be made aware of any available EAP visits, which are covered at 100% with no patient cost-sharing. Any applicable copay or coinsurance should be collected by your office directly from the patient. In the event a BHS member contacts you directly and schedules an appointment, you may call us to confirm eligibility and for specific benefit information. In addition, we would ask that you direct the member to contact our office to speak with a Care Coordinator by calling 800-245-1150.

### BHS Follow Up and Care Coordination

BHS' care management activities are intended to support our members' success in treatment and achievement of positive outcomes. You may be contacted periodically by one of our Care Coordinators for brief progress updates. The Care Coordinator is also available to assist in the coordination of additional referrals if needed, or in the location of community-based resources necessary to provide patients or family members with added support.

### Contact BHS

**Phone:**  
800-245-1150  
205-879-1178

**Fax:**  
205-879-1178

**Mail:**  
Behavioral Health Systems  
P.O. Box 830724  
Birmingham, AL 35283-0724