

# California Helpful Sources for the Billing and Coding of HealthySteps Aligned Services

The HealthySteps National Office Policy & Finance Team



## About this Document

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When focused on billing, coding, and reimbursement for HealthySteps aligned services, have you ever needed a link that would take you directly to a website that has the key information you are looking for? Do you need to speak to a live person regarding a key reimbursement-related question? If so, this document can help and/or point you in the right direction to get your questions answered.

Below you will find website addresses/links, and telephone numbers that may assist you in locating helpful information from Medi-Cal, California's Medicaid agency, regarding questions such as patient eligibility, provider billing manuals, and information on specialty programs the state offers (e.g., The Staying Healthy Assessment and the Comprehensive Perinatal Program).

## Medi-Cal Website Links and Telephone Number/Access to Medi-Cal's Provider Billing Manuals

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**California Medicaid:** The Department of Health Care Services (DHCS) administers and oversees Medi-Cal, California's Medicaid program. Medi-Cal is managed by local county offices throughout the state.

DHCS county office addresses, telephone numbers, and fax numbers:

<https://www.dhcs.ca.gov/services/chdp/Pages/CountyOffices.aspx>.

**Patient Eligibility:** Practices and hospitals can use the Medi-Cal Automated Eligibility Verification System (AEVS) at 1-800-456-2387 to verify a patient's Medi-Cal insurance. If a claim was denied but the patient has active Medi-Cal insurance, a confirmation number of a patient's eligibility can be obtained and used for claim's submission. The confirmation number can be placed in box 19 of the claim. Further information:

[https://files.medical.ca.gov/pubsdoco/faq.aspx#:~:text=Providers%20without%20access%20to%20the,Box%2019\)%20of%20the%20claim](https://files.medical.ca.gov/pubsdoco/faq.aspx#:~:text=Providers%20without%20access%20to%20the,Box%2019)%20of%20the%20claim).

**Medi-Cal Provider Manuals:**

[https://files.medi-cal.ca.gov/pubsdoco/Manuals\\_menu.aspx](https://files.medi-cal.ca.gov/pubsdoco/Manuals_menu.aspx)

## Supervision of Associate Behavioral Health Providers

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Associate behavioral health providers, such as Associate Clinical Social Workers and Associate Marriage and Family Therapists, are providers who are not yet licensed under the California Board of Behavioral Sciences but are working towards licensure. Their work and contribution to the care of patients requires supervision until they have obtained their license to practice independently.

Direct supervision is a requirement for those providers supervising associate behavioral health practitioners.



California's Board of Behavioral Sciences statutes and regulations are followed by Medi-Cal. The statutes and regulations list the direct supervision requirements under each professional provider type:

<https://www.bbs.ca.gov/pdf/publications/lawsregs.pdf>.

## The American Academy of Pediatrics Periodicity Schedule

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Bright Futures, led by the American Academy of Pediatrics (AAP), is a national health promotion and prevention initiative program. The Bright Futures guidelines provide evidence-driven guidance for all preventive care screenings and health supervision visits. The Bright Futures Periodicity Schedule, also referred to as the periodicity table, lists recommended pediatric services such as screening requirements, and it is recognized by Medi-Cal and adopted as the standard of care in the state.



The AAP's Bright Futures 2023 Periodicity schedule:

<https://www.aap.org/en/practice-management/bright-futures/bright-futures-materials-and-tools/bright-futures-guidelines-and-pocket-guide/>.

Once in the page, click onto the hyperlink labeled, **"Bright Futures/AAP Periodicity Schedule."**

## The Staying Healthy Assessment (SHA)

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**The SHA** is DHCS' Individual Health Education Behavioral Assessment (IHEBA). Its completion is required yearly, or when either the patient has entered a new age group, or if changes have been identified during a visit, where an update to the SHA may be required.

Versions of the SHA:

<https://www.dhcs.ca.gov/formsandpubs/forms/Pages/StayingHealthyAssessmentQuestionnaires.aspx>.

California allows managed care providers to apply for approval to use alternative assessment questionnaires, such as the Bright Futures Pre-visit Questionnaire. Information on this questionnaire can be obtained on the American Academy of Pediatrics Bright Futures website:

<https://www.aap.org/en/practice-management/bright-futures>.

## The Comprehensive Perinatal Services Program (CPSP)

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The California Department of Public Health engages in the CPSP, a program that was implemented by DHCS to provide enhanced prenatal and postpartum care to eligible patients.

Information on the program and how to become a CPSP provider:

- [Comprehensive Perinatal Services Program \(ca.gov\)](https://www.cdph.ca.gov/Programs/CFH/DMCAH/CPSP/Pages/default.aspx#:~:text=The%20Comprehensive%20Perinatal%20Services%20Program%20(CPSP)%20provides%20a%20wide%20range,nutrition%2C%20psychosocial%20and%20health%20education).
- [https://www.cdph.ca.gov/Programs/CFH/DMCAH/CPSP/Pages/default.aspx#:~:text=The%20Comprehensive%20Perinatal%20Services%20Program%20\(CPSP\)%20provides%20a%20wide%20range,nutrition%2C%20psychosocial%20and%20health%20education](https://www.cdph.ca.gov/Programs/CFH/DMCAH/CPSP/Pages/default.aspx#:~:text=The%20Comprehensive%20Perinatal%20Services%20Program%20(CPSP)%20provides%20a%20wide%20range,nutrition%2C%20psychosocial%20and%20health%20education).

## Preventive Psychotherapy

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Medi-Cal will not only reimburse psychotherapy services for the treatment of a mental health and/or developmental disorder but will also reimburse for the *prevention* of mental health disorders.

There are three categories of medical necessity for preventive psychotherapy:

1. Patients under the age of 21 that are not diagnosed with a mental health and/or developmental disorder but have a history of at least one of the approved Medi-Cal risk factors, and/or if they have a parent/guardian with one of the approved Medi-Cal risk factors.
2. When a patient presents with persistent mental health symptoms, with the potential of a mental health disorder.
3. Psychotherapy for the prevention of perinatal depression.

The Medi-Cal non-specialty mental health services guide contains information regarding medical necessity, billing, coding, and regulations for providing and reporting these services:

<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/nonspecmental.pdf>.

## Dyadic Services

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Dyadic services involve treatment delivered to a caregiver(s) and child simultaneously to provide support to families and children. Medi-Cal will reimburse for specified dyadic services under the Dyadic Care Benefit.

Information on the Dyadic Care Benefit can be found in the Medi-Cal Non-Specialty Mental Health Services: Psychiatric and Psychological Services Manual:

<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/nonspecmental.pdf>.

The core technical assistance staff at the University of California San Francisco's Center for Advancing Dyadic Care in Pediatrics provide support in implementing dyadic care at practices. Information on the Center:

[Center for Advancing Dyadic Care in Pediatrics | About Us \(ucsf.edu\)](#).

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