

To: All Research Based -Behavioral Health Treatment (RB-BHT) Providers
From: Cham Trowell, Utilization Management Director
Date: January 5, 2024
Subject: Changes for authorization requirements for Research Based - Behavioral Health Treatment (RB-BHT)

CHANGES FOR AUTHORIZATION REQUIREMENTS FOR RESEARCH BASED-BEHAVIORAL HEALTH TREATMENT

Trillium is making Research Based-Behavioral Health Treatment (RB-BHT) no prior authorization needed for Medicaid services effective immediately and extending through April 30, 2024. A Treatment Authorization Request (TAR) will not be required for RB-BHT claims to process.

All Medicaid members with concurrent service needs may file claims without authorization between now and April 30, 2024. Beginning on May 1, 2024, prior authorization in Trillium Business System (TBS) will be required to file a claim for specified services. [Trillium's benefit plan](#) can be found on our website and includes information on prior authorizations. This benefit plan will be updated prior to 2/1/2024.

Assessments codes (97151 and 97152) require an assessment supporting ASD diagnosis (utilizing valid diagnostic tool) and service order completed by MD, DO, PhD, or PsyD. Additional codes require a treatment plan. These documents should be a part of the member's clinical record and available upon request. All services provided are subject to a post payment review to assure that medical necessity was met at the time of service delivery and all clinical information must still be completed as required by policy.

Beginning April 15, 2024, authorizations must be submitted in (TBS) Trillium Provider Direct to request services with prior approval for effective dates from May 1, 2024 going forward.

All clinical documents are required according to Clinical Coverage Policies. Services must adhere to the Trillium Benefit plan posted on the Trillium website.

All questions related to this Clinical Communication Bulletin can be sent to UM@TrilliumNC.org. Questions will be responded to as quickly as possible. We are working to address other questions and concerns as quickly as possible. Thank you for your patience.

Thank you for your attention to this communication. All questions related to this Clinical Communication Bulletin can be sent to UM@TrilliumNC.org. Questions will be responded to as quickly as possible.