



Understanding the Behavioral Health Services Only Program

The Health Care Authority (HCA) is transforming health care by focusing on the whole person and ensuring care is coordinated and delivered where and when a person needs it. By January 2020, all regions of the state will transition to an integrated system for physical health, mental health, and substance use disorder services in the Washington Apple Health (Medicaid) program.

What is the Behavioral Health Services Only (BHSO) Program?

For Apple Health clients who get their physical health care coverage through Apple Health's fee-for-service system, or through alternative coverage (such as Medicare), the HCA has created the Behavioral Health Services Only (BHSO) program. Through the BHSO program, clients get Apple Health coverage for their specialty mental health care and substance use disorder treatment (together, called behavioral health care).

Certain behavioral health care services are funded by the Washington State Legislature (outside of Apple Health) or by federal block grants. These services complement Apple Health benefits and will be available to BHSO-covered Apple Health clients who meet program and medical necessity criteria.

BHSO coverage is provided through Apple Health managed care plans. Having BHSO coverage does not change a person's primary care coverage through the Apple Health fee-for-service system, Medicare, or their own health insurance plan.

Who will be enrolled in a BHSO plan?

All Apple Health clients who receive their physical health care coverage outside of Apple Health managed care and who are eligible for Apple Health covered behavioral health care services, will automatically receive BHSO coverage. These Apple Health clients include:

- Individuals covered both by Medicare and Apple Health (Medicaid) (dual-eligible).
- Individuals receiving coverage under the Apple Health fee-for-service system.
- Individuals in foster care, foster care alumni, or individuals receiving adoption support.
- American Indians/Alaska Natives who exercise their federal right to opt-out of the
 integrated managed care program and receive their coverage under the Apple Health feefor-service system and under Indian Health Service (IHS)-funded programs (such as IHS
 direct care facilities, Tribal 638 facilities, and urban Indian health facilities).
- Individuals who must meet spenddown requirements before they are eligible for Apple Health benefits.
- Certain populations of individuals who are under the age of 22 or over the age of 65 and residing in an institute for mental disease.
- Non-citizen pregnant women.
- Individuals in hospice before enrolling in managed care.
- Certain individuals who have private insurance coverage.

What services are covered in the BHSO program?

Mental health inpatient treatment

Medically necessary inpatient crisis care:

- Evaluation
- Treatment
- Community hospitalization

Mental health outpatient treatment

Mental health outpatient services may include:

- Intake evaluation
- Individual treatment services
- Medication management
- Medication monitoring
- Group treatment services
- Peer support
- Brief intervention and treatment
- Family treatment
- High intensity treatment
- Therapeutic psychoeducation
- Day support
- Stabilization services
- Rehabilitation case management
- Mental health services provided in a residential setting
- Special population evaluation
- Psychological assessment

Substance use disorder services

Substance use disorder services may include:

- Assessment
- Brief intervention and referral to treatment
- Withdrawal management (detoxification)
- Outpatient treatment
- Intensive outpatient treatment
- Inpatient residential treatment
- Opiate substitution treatment services
- Case management

How is the BHSO program different from the behavioral health organizations we were accustomed to using?

The coverage provided by the BHSO program is the same coverage provided to individuals who receive care through a behavioral health organization (BHO). The main difference between the BHSO program and the BHO is that the BHSO program is operated by the managed care plans, while the BHO is a county-based managed care entity.

How are clients enrolled in the BHSO program? How do clients pick their own BHSO plan?

Apple Health clients who are not enrolled in an Apple Health managed care plan but are eligible for the BHSO program will be automatically assigned to one of the available managed care organizations. Clients can change their plan by contacting the HCA Medical Assistance Customer Service Center toll-free at 1-800-562-3022, Monday through Friday from 7 a.m. to 5 p.m. (TTY/TDD 711 or 1-800-848-5429 for people with hearing or speech equipment.)

Learn more about Healthier Washington and integrating behavioral and physical health care at www.hca.wa.gov/about-hca/healthier-washington/integrated-physical-and-behavioral-health-care.