

Provider Alert

Coverage for Certain Behavioral Health Acute Treatment [Bulletin-2023-07](#)

Effective 11/8/2022 carriers are not permitted to require any prior authorization for community-based acute treatment, intensive community-based acute treatment, or mental health acute treatment provided to Mass Health and Massachusetts situated commercial fully insured plan members.

Providers delivering care are required to provide notification within 72 hours of the patient's admission to the facility, to include the following information:

- Member's name
- Facility name
- Time of admission
- Diagnosis
- Initial treatment plan

Although Carriers are not permitted to apply prior authorization processes, they may apply concurrent review and retrospective review processes for care provided 73 hours or after admission.

Note: Carriers are only permitted to request additional clinical information when conducting concurrent review or retrospective review for care provided 73 hours after admission. Providers that seek authorization for additional care (days) beyond the 72-hour notification period will need to provide clinical information to support that authorization request.