

Behavioral Health Treatment (BHT)/ABA Guide

What is Behavioral Health Therapy under Medi-Cal managed care?

• BHT services are evidence based practice (EBP). They teach skills through the use of behavioral observation and reinforcement, or through prompting to teach each step of a targeted behavior.

Who qualifies for BHT under Medi-Cal managed care?

- Individuals under 21 years of age;
- Have obtained a clinical recommendation from a licensed physician or a licensed psychologist indicating that BHT services are medically necessary;
- Have a copy of their Comprehensive Diagnostic Evaluation Report or Psychological Assessment report, because it is helpful in obtaining a clinical recommendation and justifying medical necessity.
- Are medically stable, without the need of 24-hour nursing care.

How do I access BHT services?

- Call the phone number listed on your Medi-Cal managed care plan (MCP) card and request ABA.
- If you do not know which plan you are assigned to, call Health Care Options at (800)430-4263.

L.A. CARE	(888)347-2264 Fax (213)438-5054
Health Net	(800)675-6110/ 24-Hour Line-MHN: (888)935-5966
Blue Shield of California	(888)297-1325
Promise Health Plan	
(formerly Care First)	
Anthem Blue Cross	(888) 831-2246
Molina	(888)665-4621 For Additional Questions (888)562-5442 Ext.123250
Kaiser Permanente	I-800-464-4000 or TTY 711 or I-800-788-0616 (Spanish)

• Call your Regional Center Service Coordinator if you are having ongoing challenges accessing BHT.

What rights do beneficiaries have if they don't agree with a denial or change in BHT services?

- Call and file a grievance and/or appeal with the MCP
- Request a State Hearing
- Or, request an Independent Medical Review (IMR)

What are the responsibilities of the provider (vendor) and beneficiary?

- Providers must verify Medi-Cal eligibility and obtain authorization from the MCP before BHT services are provided.
- Beneficiaries must complete the annual Medi-Cal redetermination application process to remain eligible for Medi-Cal.

If a beneficiary is not currently enrolled into a Medi-Cal MCP, how can they access BHT services?

These beneficiaries must pursue funding of BHT services through Regional Centers.

See FAQs from DHCS (dated 12/11/15); See APL 15-025 (page 6) and APL 18-006 (page3); See 7/7/14 CMS released guidance regarding Section 1905(a)(4)(B) of the Social security Act (SSA) for Early Periodic Screening, Diagnostic and Treatment services (EPSDT)...for low income individuals under 21 years of age; See FAQs from DHCS (dated 12/11/15).