

**03/18/2024**

## **Guidance on Identifying Maternal Mental Health Providers: Phase 1**

### **Background:**

In accordance with Senate Bill (S.B.) 750, 86<sup>th</sup> Legislature, Regular Session, 2019, HHSC established MCO requirements around identification of maternal mental health providers and referral of members with maternal mental health conditions, which were published in UMCM 3.34 *Online Provider Directory* and UMCM Chapter 16.1.15.3.9 *Maternal Mental Health Treatment Network*.

As described in UMCM Chapter 16.1.15.3.9, maternal mental health conditions include conditions such as perinatal and postpartum depression, anxiety disorders, post-traumatic stress disorder, bipolar illness (which may include psychotic symptoms), and substance use disorders, occurring within 12 months postpartum.

In response to feedback from MCOs, HHSC will allow a phased approach for MCOs to implement the identification of maternal mental health providers in their provider network:

- Phase 1 will require MCOs to identify behavioral health (BH) providers able to treat maternal mental health conditions.
- Phase 2 will require MCOs to identify non-BH providers, including primary care providers (PCPs) and OB/GYNs, able to treat maternal mental health conditions.

The purpose of this notice is for HHSC to provide guidance on Phase 1.

### **Key Details:**

HHSC is not requiring MCOs to use a specific approach to identify BH providers in their network to list as maternal mental health providers. However, HHSC recommends possible approaches MCOs may consider:

1. Opt-in: MCOs may conduct outreach to their BH provider network to request providers self-identify if they have experience treating maternal mental health conditions and opt-in to be included in the MCO's online provider directory as a maternal mental health provider.
2. Claims Identification: MCOs may review claims data from their BH provider network to identify providers with a history of treating Medicaid for Pregnant (TP40) members and/or billing for related procedure codes, indicating experience with maternal mental health treatment. Under this approach providers should be allowed to request to opt-out if they choose.
3. Combined Approach: MCOs may consider a combination of the approaches described above. This may include using claims data as well as allowing providers to opt-in if they have a desire to be included but not an established history.

As best practice, HHSC recommends collaboration among MCOs, especially those in the same service areas, along with provider associations and BH organizations to adopt a consistent approach (as described above) to best serve the needs of members with maternal mental health conditions.

### **Action:**

HHSC requires MCOs to implement Phase 1 within 90 business days of publication of this MCO notice. Phase 1 implementation activities include listing identified providers in the MCO's online provider directory and informing the MCO's provider network of the changes.

HHSC is willing to collaborate with MCOs on messaging to providers and review any materials MCOs develop. Additionally, HHSC will develop and share a notice with relevant provider associations about these requirements soon after the publication of this MCO notice.

**Additional Information:**

In the future, HHSC will publish guidance for Phase 2 through an MCO notice.

**Resources:**

[UMCM Ch 3.34 MMC-CHIP Online Provider Directory \(texas.gov\)](#)

[UMCM Chapter 16.1 - Medicaid and CHIP Contract Operational Guidance \(texas.gov\)](#)

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