

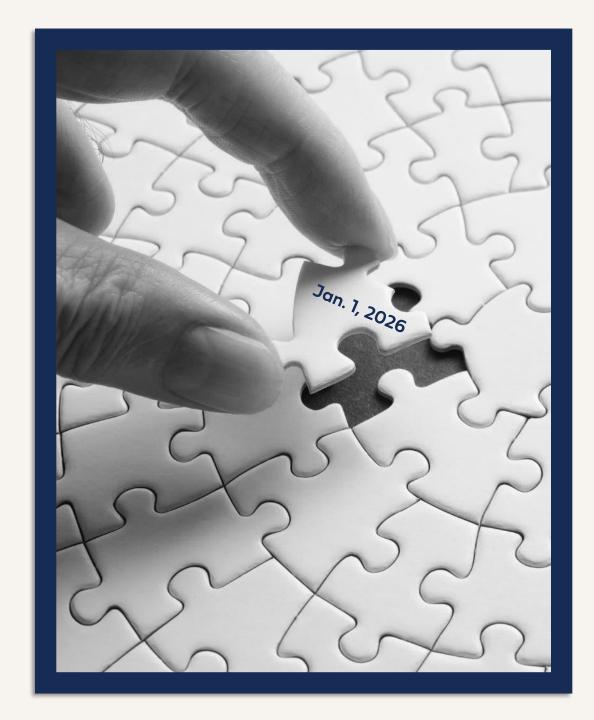
Transitioning Behavioral
Health Services Management
to Blue Shield of California

Behavioral Health Providers
October 21, 2025



This presentation and a link to the recording will be emailed to you within five (5) business days.

Transitioning
Behavioral Health
Services Management
to Blue Shield



# The complete management of Behavioral Health

As part of our mission to provide access to highquality care, and to offer a more streamlined and connected experience for both members and providers, Blue Shield of California is making the following changes effective January 1, 2026:

- Behavioral Health: We will begin directly managing Behavioral Health services members enrolled in commercial HMO and PPO plans, as well as for Group Medicare Advantage Prescription Drug (GMAPD) HMO and PPO members, including Applied Behavioral Analysis (ABA).
- Will also begin managing ABA Services for self-funded and Shared Advantage plans. (All other behavioral health services for these members are already managed by Blue Shield.)

This transition completes Blue Shield's strategic plan, implemented in phases during the last several years, to directly manage Behavioral Health services for all Blue Shield and Blue Shield Promise plan members.

Why move behavioral health services to Blue Shield?

"...to provide care worthy of our family and friends."

#### Our mission

To ensure all Californians have access to high-quality health care at an affordable price.

#### Simplify experience

Blue Shield Behavioral Health aims to **simplify the experience for both members and providers** by providing a single source of service for member services, referrals, authorizations, and claims.

#### Quality care

Close coordination of medical and behavioral health care services is shown to **improve clinical outcomes** and boost both member and provider satisfaction.



What behavioral health services are supported?

#### **Behavioral Health Services**

Currently, Blue Shield's Mental Health Service Administrator (MHSA), Human Affairs International of California, Inc. (a subsidiary of Magellan Health a/k/a "Magellan"), directly manages the administration of mental health and substance use disorder services. Beginning January 1, 2026, Blue Shield Behavioral will directly manage the following benefits and services:

- Inpatient residential treatment and outpatient behavioral health services
- Applied Behavioral Analysis (ABA) services
- Outpatient maternity-related mental health
- Psychiatric medication management
- Self-guided resources
- Referrals
- Crisis intervention
- Substance use disorder



# Supporting timely access to Behavioral Health care

Blue Shield is committed to ensuring timely access to Behavioral Health care for our members and is actively supporting Senate Bill 855 (SB 855), which requires health plans to assist members in accessing medically necessary behavioral health services.

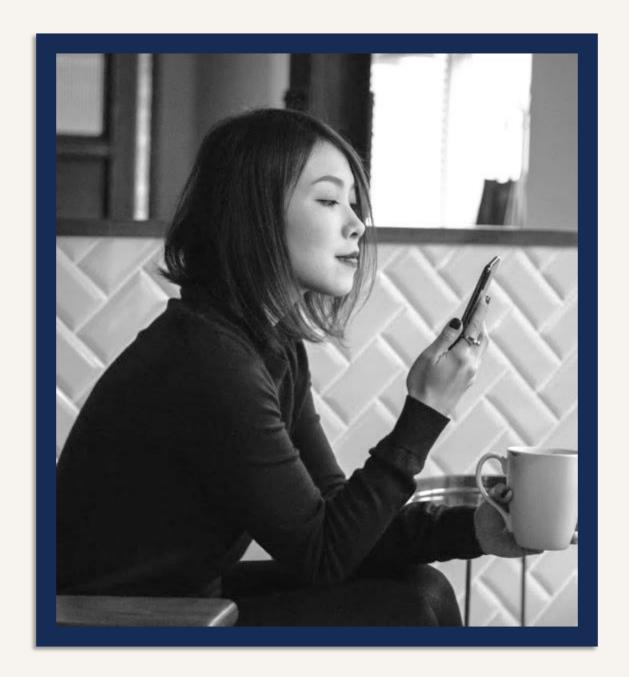
#### As part of this initiative:

- Our Behavioral Health Care Management team will assist members in scheduling Behavioral Health appointments.
- To fulfill this requirement, our Behavioral Health
  Care Management team may contact you to
  request available appointment dates and times to
  help connect members with appropriate providers.

To meet access standards, the Care Management team will inquire about appointment availability within the following timeframes:

- Routine appointments: within 10 business days
- Urgent appointments: within 48 hours





# How will members find out about the change?

- ✓ We started informing members in early Q4 of 2025.
- ✓ Plan information is available to members for open enrollment/2026 benefits.
- ✓ Information regarding the transition and behavioral health resources will be available on the Blue Shield member website.
- ✓ Transition date: January 1st, 2026 for Blue Shield of CA to manage Behavioral Health Services.

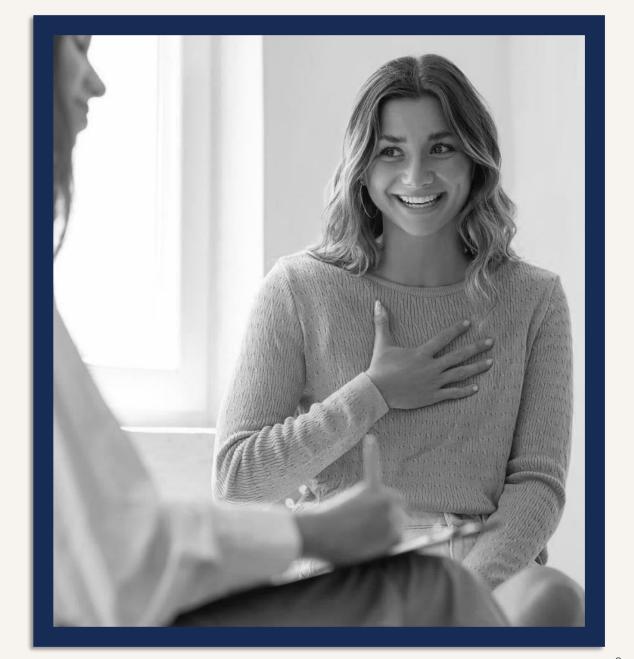
# Care for members transitioning to Blue Shield Behavioral Health

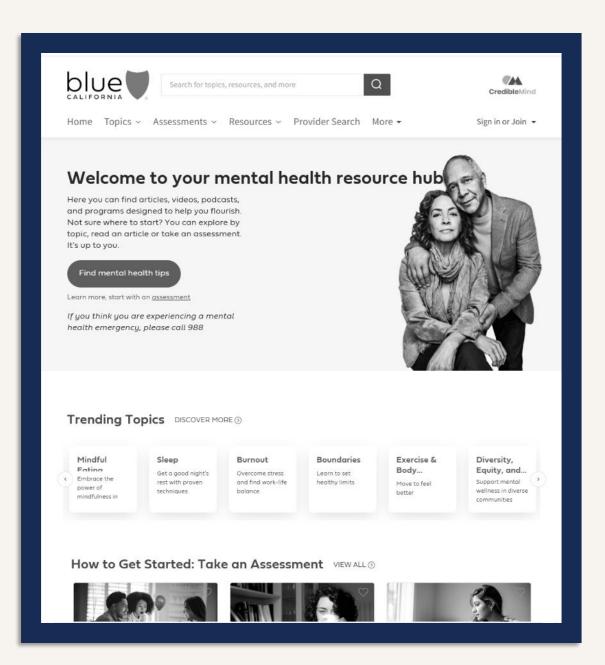
Blue Shield is making every effort to match and expand the behavioral health provider network currently available to members.

There may be some members who need to switch to a Blue Shield contracted provider for in-network services. In those cases, Blue Shield and Magellan will work together to ensure the best care for the patient.

Continuing care - Blue Shield will review continuity of care requests from members and will notify members and treating providers of determinations.

Transitioning Care – collaborative planning with Magellan starting in early November 2025.





# Member Behavioral Health programs and resources

A comprehensive range of programs and resources are available to members for mental health and substance use disorder including:

- Find a Behavioral Health provider
- Inpatient and facility-based treatment
- Therapy and medication
- Telehealth
- Applied Behavioral Analysis (ABA)
- Self-guided resources, articles, and assessments

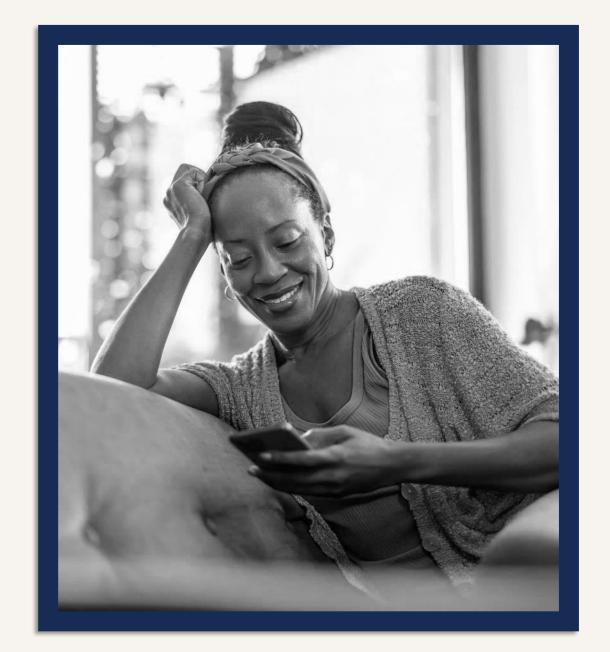
# Referrals, authorizations, & claims

### **Prior Authorization**

Prior authorization **continues to not be required** for these behavioral health services:

- Emergency services
- Initial assessments (what level of care does this member need?)
- Outpatient therapy
- Outpatient medication management
- Psychological testing

Members can contact their providers and/or can start behavioral health services at any point in the care continuum, receiving referrals, if/as needed, to other levels of care.



### Prior Authorization (cont.)

Prior authorization **will be required** for these behavioral health services:

- Acute Inpatient care
- Residential Treatment (RTC)
- Partial Hospital Program (PHP)
- Intensive Outpatient Program (IOP)
- Applied Behavioral Analysis (ABA) therapy
- Neuropsychological testing
- Electroconvulsive Therapy (ECT)
- Transcranial Magnetic Stimulation (TMS)



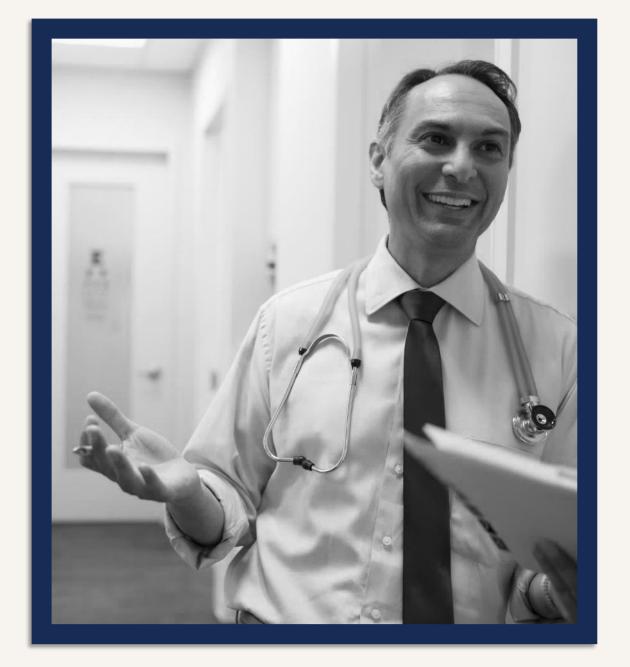
### Prior Authorization (cont.)

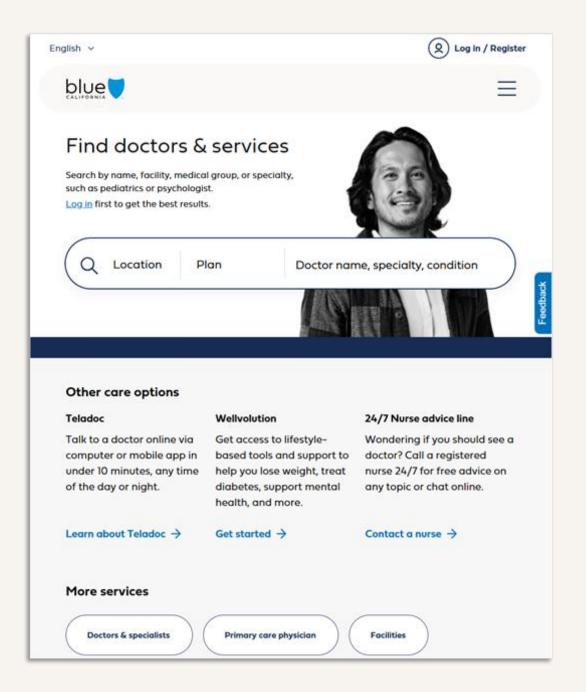
Prior authorization can be requested via:

- **Phone**: (877) 263-9952
- Fax:
  - o BH Fax Intake: (844) 742-1155
  - o BH Fax Intake (urgent): (844) 729-1416
- **Provider Connection:** Authorizations page

In accordance with SB855 (California Mental Health Parity law), **Blue Shield will apply Non-Profit Association guidelines** to all clinical reviews for fully insured membership.

BH Treatment Authorization Forms available via Provider Connection





# Behavioral Health care collaboration

Providers looking for a Blue Shield Behavioral Health practitioner who they can recommend to their patient, or to whom they can formally refer their patient, if needed, to coordinate specialty care can access these resources:

#### Online

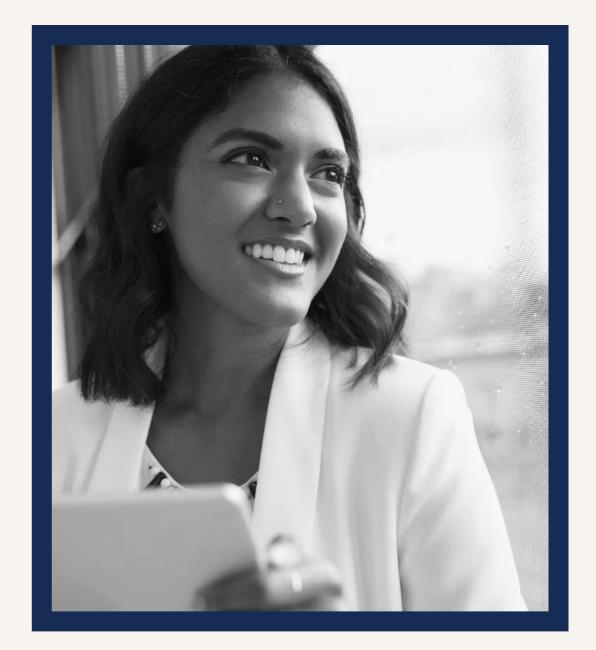
Search our online **Find a doctor** tool: www.blueshieldca.com/fad/home

#### By phone

Call Blue Shield Provider Services at **(800) 541-6652** (6 a.m. - 6:30 p.m. PT to speak with a live representative)

# Behavioral Health authorizations during the transition

- For dates of service beginning January 1, 2026, and onward, all authorization requests for Behavioral Health services must be submitted to Blue Shield, and will no longer be accepted by Magellan.
- Magellan will remain responsible for authorizations for services provided through December 31, 2025, and Blue Shield will honor those authorizations when the transition occurs on January 1, 2026.
- In cases of facility-based care that requires concurrent review, Blue Shield will collaborate with Magellan to determine the best approaches for transitioning medical necessity requirements for ongoing care.



### Behavioral Health claims

- For dates of service through 12/31/2025, submit to the MHSA.
- For dates of service starting 1/1/2026 and after, submit to Blue Shield.

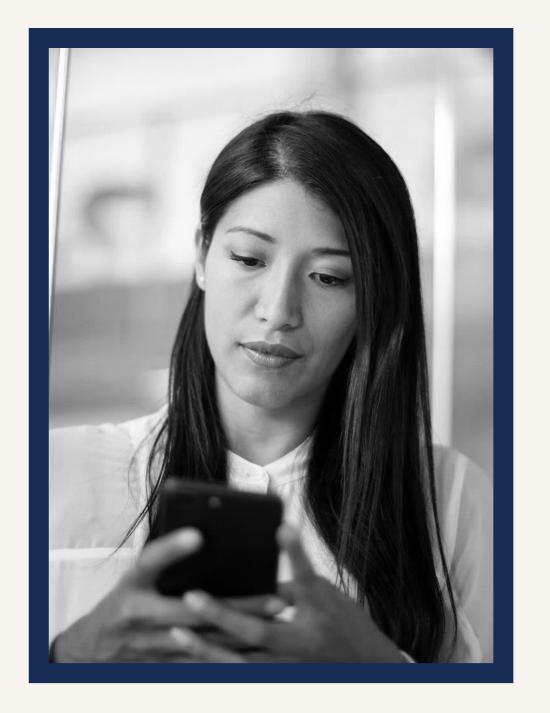
## Date of service is key



### Contact numbers not changing

The contact phone number for Behavioral Health questions is not changing before or after January 1, 2026, please continue to call: **(877) 263-9952**.

- Now through December 31, 2025:
   Magellan will answer the calls and assist members and/or providers regarding services provided through December 31, 2025.
- Beginning January 1, 2026: Blue Shield will take ownership of the same phone number and answer the calls. Blue Shield will determine whether to assist the caller or transfer the call to Magellan (for dates of service through December 31, 2025).
- Blue Shield Provider Services at (800) 541-6652 will continue to be available to providers for all inquiries, and new prompts will direct providers to Behavioral Health Services, as needed.



# Working with Blue Shield

#### **Provider Connection**

#### Your <u>connection</u> to Blue Shield!

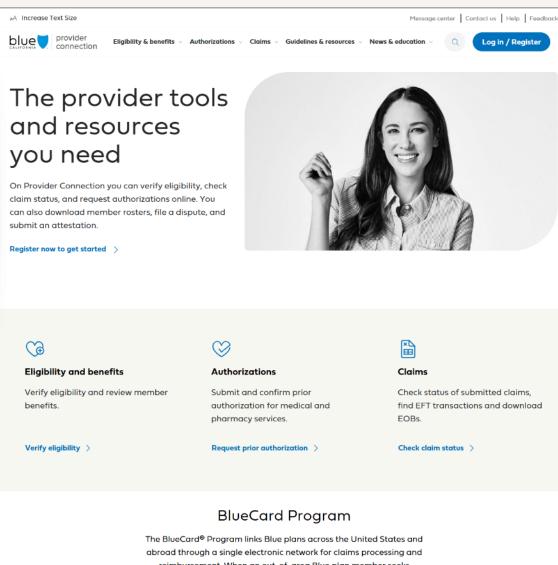
https://www.blueshieldca.com/en/provider

- ✓ Check member eligibility
- ✓ Submit authorizations
- ✓ Check claim status

BLUE SHIELD OF CALIFORNIA

- Maintain provider information so members can find the doctors they need
- ✓ Live online chat with Blue Shield Provider Customer Service

In addition, Provider Connection gives you access to authorization lists and forms, medical policies, patient resources, education on Blue Shield products, plans, and networks, Provider Connection training, and more.



The BlueCard® Program links Blue plans across the United States and abroad through a single electronic network for claims processing and reimbursement. When an out-of-area Blue plan member seeks medical care from your office, use our tools to simplify claims submission to Blue Shield of California.

**Explore the BlueCard Program** 

## Registering on Provider Connection

For data security and privacy, most of the key features are "authenticated tools" and require you login as an authorized account manager.

Identify a Provider Connection **Account Manager** for your organization and create an account.

We must verify that you're authorized to represent your provider; you need to provide information for one claim that is:

- Either Blue Shield of California or Blue Shield of California Promise Health Plan, dated within the last three months; and
- For those claims, you need a check/EFT number, claim number, or Member ID number and the check/EFT amount

#### Register as an account manager

Creating your Provider Connection account should take about 5 minutes.

#### Create account

#### To register you'll need:

- Your organization's tax ID number
- The provider tax IDs you'd like to represent

#### You may also need:

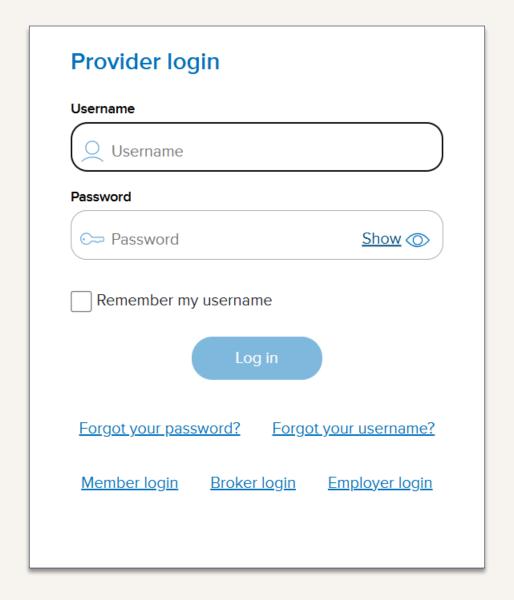
- A claim from the last 3 months for some tax IDs
- The Business Associate Agreement (BAA) date for each provider

Are you an account manager? Not an account manager?

# Logging into Provider Connection

To verify your identity, Blue Shield uses two-step authentication. You must enter your username and password plus the code Blue Shield sends to your email.

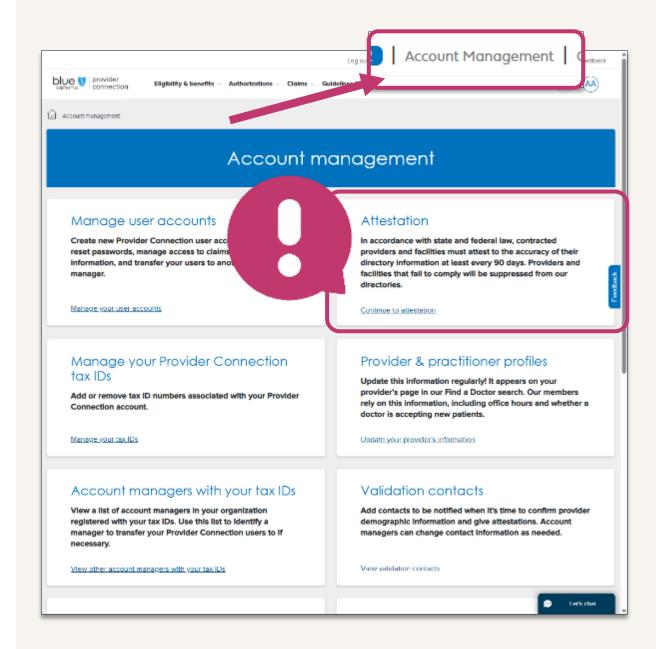
This is required each time you log in, unless you select the "remember my username" option.



# Provider Connection Account Management

As an account manager, use the Account Management page to manage important tasks such as:

- Attest to accuracy of your provider directory information (required every 90 days) to remain visible in the active directory
- ✓ Update provider directory information
- ✓ Add and manage users



# Finding what you need

### The provider tools

#### Navigation bar:

Links to the home page, search, Log in/Register, and the five site sections: Eligibility & benefits, Authorizations, Claims, Guidelines & resources, and News & education.

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Register now to get started

#### Quick access to the tools you use most:

Jump directly to features such as verify eligibility, request prior authorization, and check claim status.



#### Eligibility and benefits

Verify eligibility and review member benefits.

Verify eligibility



#### Authorizations

Submit and confirm prior authorization for medical and pharmacy services.

Request prior authorization



#### Claims

Check status of submitted claims, find EFT transactions and download EOBs.

Check claim status

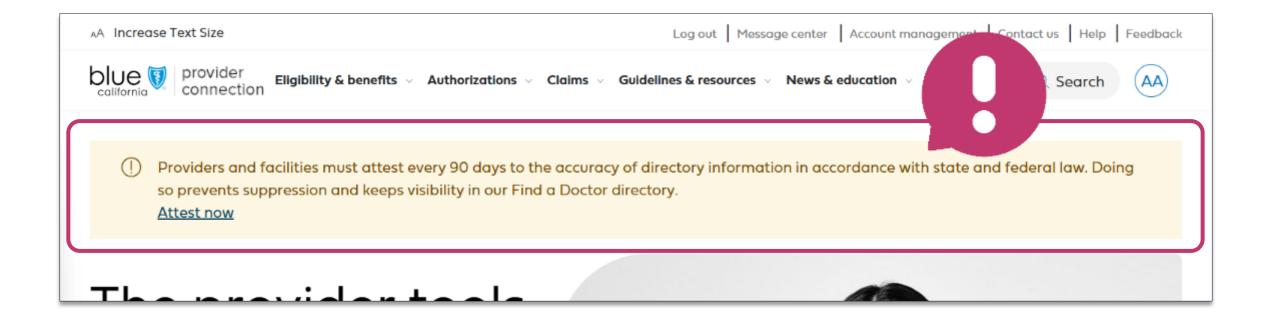
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Explore the BlueCard Program

### Attest & update Provider Directory information

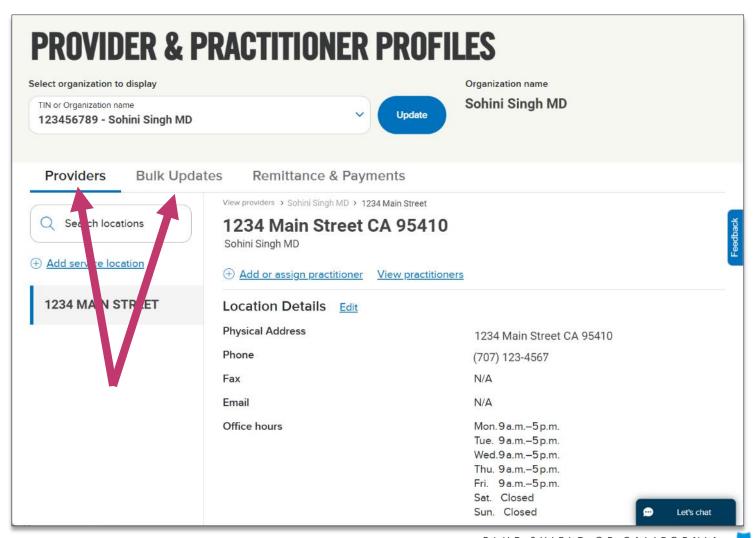
Federal law requires providers to attest to their data every 90 days, even if it has not changed, and update it whenever it changes to remain visible in the active directory.



### Update Provider Directory information

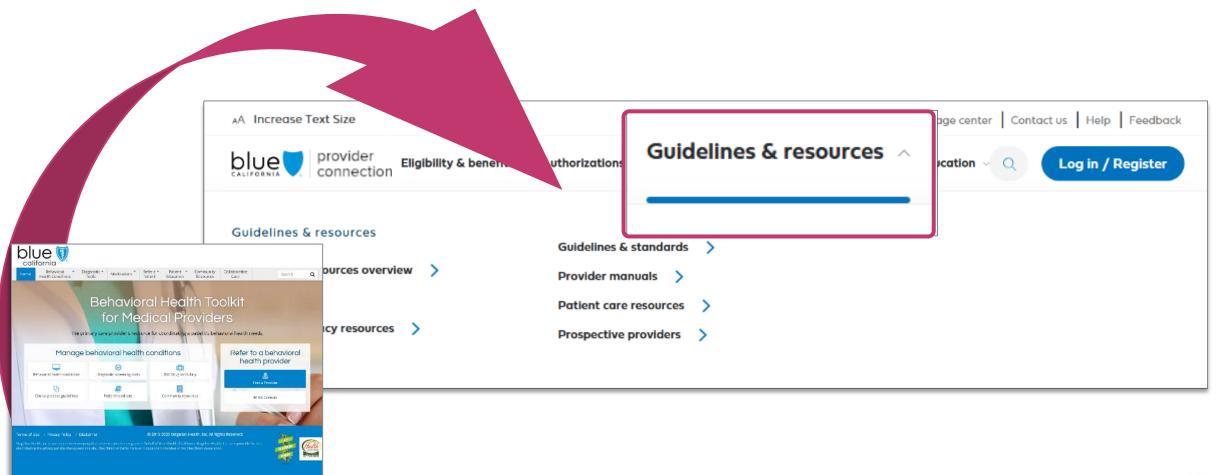
Keep your provider directory information up-to-date – **members rely on this information** when using "Find a doctor" search function to find a physician.

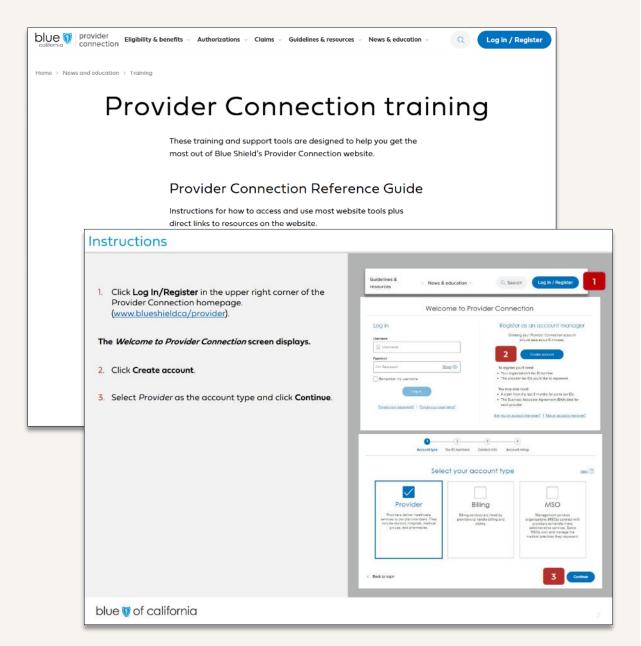
Make single edits or bulk updates for large provider organizations on the Provider & Practitioner Profiles page.



### Behavioral Health resources

There will be (currently under development) a dedicated page for behavioral health resources under the *Guidelines & resources* section that replaces the current PCP Behavioral Health Toolkit website.





# Provider Connection training and support pages

Step-by-step instructions for common tasks

**Provider Connection training** 

Provider Connection Reference Guide

Provider Connection Account FAQ

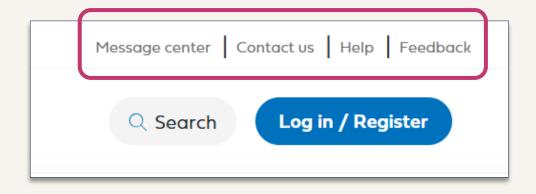
### Contact us and Help

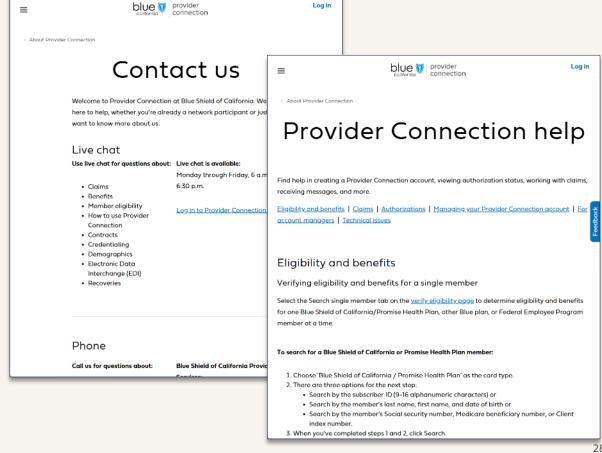
#### Contact us

Access to live chat and customer service for phone numbers to both Blue Shield and Blue Shield Promise provider services.

#### Help

Detailed summaries of key tasks for referrals, authorizations, and claims including how to manage your Provider Connection account.





# Thank you



Blue Shield of California is an independent member of the Blue Shield Association