



## **Certified Community Behavioral Health Clinics**

### **Billing guidelines for fully insured Commercial claims**

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When providing behavioral health services to members covered by a fully insured Commercial health plan, Certified Community Behavioral Health Clinics (CCBHC) must adhere to the following claim requirements:

#### **Claim Requirements**

- Bill on a CMS-1500 Form
- T1040 should be billed in Box 24 with the provider's state rate
- All encounter codes (one per claim line) need to be included on the claim in Box 24 with a \$0 dollar amount, whether they are covered by behavioral health or not.

These requirements – release by the New York Office of Mental Health (OMH) apply to fully insured individual and group comprehensive health insurance policies and contracts issued in New York that are renewed, modified, altered or amended on and after Jan. 1, 2025.

Specifically, New York Part AA of Chapter 57 of the Laws of 2024 ("Chapter 57") requires New York state-regulated insurers to reimburse in-network providers who are licensed, certified or authorized by the Office of Mental Health (OMH) and Office of Addiction Services and Supports (OASAS) at or above the Medicaid rate for outpatient services.

#### **Questions?**

Visit the [OMH website](#) for additional information on New York state billing requirements for Commercial claims. For questions about Optum Behavioral Health, contact your Provider Relations Advocate.