

Associate Level Mental Health Care

Scope		
This policy applies to:		
☑ Kaiser PermanenteHealth Plan ofWashington☑ Commercial	☑ Kaiser PermanenteHealth Plan of WashingtonOptions, Inc.☐ Medicare	□ Medicaid
Policy	Original Effective Date: 01/01/2022	
Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not directly reimburse for care provided by associate level therapists or counselors (LMFTA, LMHCA or LICSWA). Care provided by		

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services guidelines.

associate level therapists or counselors must be supervised and billed by a qualified mental

Policy Definitions

health provider.

Associate - An associate is a pre-licensure candidate who has a graduate degree in a mental health field under RCW 18.225.090 and is gaining the supervision and supervised experience necessary to become a licensed independent clinical social worker, a licensed advanced social worker, a licensed mental health counselor or a licensed marriage and family therapist. Associates may not independently provide social work, mental health counseling or marriage and family therapy for a fee, monetary or otherwise. Associates must work under the supervision of an approved supervisor. Independent social work, mental health counseling or marriage and family therapy is the practice of these disciplines without being under the supervision of an approved supervisor.

LMFTA – Licensed Marriage and Family Therapist Associate

LMHCA – Licensed Mental Health Counselor Associate

LICSWA - Independent Clinical Social Worker Associate

Prerequisite(s)

Treating associates will provide each client or patient, during first professional contact, with a disclosure form according to RCW <u>18.225.100</u>, disclosing that he or she is an associate under the supervision of an approved supervisor.

<u>Practitioner Credentialing</u> - You must be credentialed before providing covered services to our members. This includes new practitioners who are joining an already credentialed group practice.

Mental health licensing, credentialing, and training, including addiction and recovery - Contracted mental health practitioners must be licensed to practice independently and board-certified or board-eligible (as appropriate) in the state in which they practice.

References

Associate Licensing – Requirements – Revised Code of Washington (RCW) – RCW 18.225.145

Licensure for Mental Health Counselors, Marriage and Family Therapists, and Social Workers – Definitions – Washington Administrative Code (WAC) – <u>246-809-010</u>

Licensed Mental Health Counselors and Licensed Mental Health Counselor Associates - Definitions – Washington Administrative Code (WAC) – $\underline{246-809-210}$.

Frequently Asked Questions

- Q1: I am a LMHCA, LMFTA, LICSWA, practicing via secure video chat. I do not bill insurance but will provide patients with the documentation needed to submit for reimbursement. Will their services with me be covered?
- A1: Yes and No.

Yes, if the documentation for billing is your supervising LHMC's, LMFT's, LICSW's information.

No, if the documentation for billing is your information.

Kaiser Permanente does not credential or refer to LMHCAs as they are not fully licensed to provide unsupervised care in the state of Washington. Therefore, claims submitted for care with an LHMCA is not payable.

- **Q2:** I am a LMHCA, LMFTA, LICSWA, and am practicing under a supervising LHMC, LMFT, LICSW can a Kaiser Permanente member get a referral to see me?
- **A2:** No, LMHCAs, LMFTAs, LICSWAs do not qualify for credentialing and therefore Kaiser Permanente cannot refer to them. The referral should be made to the supervising LHMC, LMFT, LICSW.

Revision History

11/13/2023 - Updated language regarding supervisor billing

05/24/2022 - Updated formatting

06/17/2021 - New Payment Policy

Note: This information is intended to serve only as a <u>general</u> reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.