

NJ FamilyCare Behavioral Health Integration

An overview for providers

Context

Behavioral health (BH) care encompasses mental health (MH) and substance use disorder (SUD) services.

In NJ's Medicaid program (NJ FamilyCare) today, members' physical health care is managed by five healthcare plans or managed care organizations (MCOs), while certain BH services are "carved out" of managed care and billed through fee-for-service (FFS).

To prioritize whole-person care where all healthcare services – both physical and behavioral health services – across the care continuum are managed under the same entity, NJ is embarking on a BH integration effort.

Three main goals

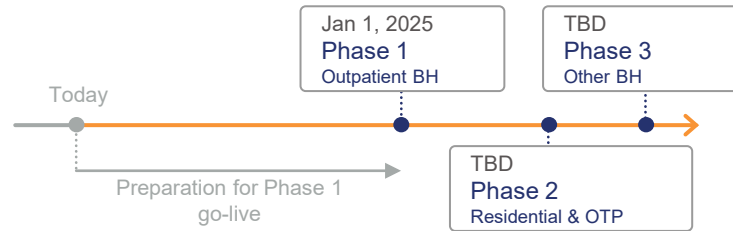
- **Increase access** to services with a focus on member-centered care
- Integrate behavioral and physical health for **whole person care**, with potential to improve healthcare outcomes.
- **Provide appropriate services** for members in the right setting, at the right time

Who will this impact?

All providers who provide BH services to Medicaid members through fee-for-service today or who plan to provide BH services to Medicaid members in the future.

Timeline for integration of services

BH services are being integrated into managed care over three phases, with Phase 1 going live on January 1, 2025.



Phase 1 – Outpatient BH Services¹

- MH outpatient counseling
- MH partial hospitalization
- MH partial care in outpatient clinics
- MH outpatient hospital and clinic services
- SUD outpatient counseling
- SUD intensive outpatient
- SUD outpatient clinics (incl. ambulatory withdrawal mgmt.)
- SUD partial care

Phase 2 – Residential & OTP

- Adult MH rehabilitation services
- SUD short term residential
- SUD medically monitored inpatient withdrawal management
- SUD long term residential
- Opioid treatment programs (OTP)

Phase 3 – Other additional BH services

Timings of phase 2 and 3 of integration and the specific services covered will be determined after Phase 1 implementation

What does this mean for providers?

Starting January 1, 2025, for members enrolled in a MCO, BH services in Phase 1 must be billed through MCOs, not FFS. Providers should prepare to follow managed care procedures, including joining MCO networks, credentialing, claims submission, and working with MCO BH care managers. Additional guidance for providers is forthcoming.

What should providers do now to prepare?

- Register for upcoming BH Integration trainings
- Enroll with NJ FamilyCare
- Credential and contract with MCOs to ensure continuity of care for your members
- Review guidance from DMAHS and MCOs

Where can I find more information?

For general information, please visit the DMAHS Behavioral Integration website or email us:



[BH Integration Stakeholder Information²](https://www.nj.gov/humanservices/dmhas/information/stakeholder/index.html)



Dmahs.behavioralhealth@dhs.nj.gov

Managed Care Organizations



Aetna



Fidelis



Horizon



United



Wellpoint

Important contact information for all 5 MCOs can be found in our **MCO Behavioral Health Resource Guide²** on the BH Integration Stakeholder Information Website

¹. Outpatient BH services are currently covered by managed care for members enrolled in MLTSS/DDD/FIDE-SNP programs, and will be integrated for general managed care population during Phase 1

². <https://www.nj.gov/humanservices/dmhas/information/stakeholder/index.html>