

Intensive Home and Community Based Services for Youth - Massachusetts



Initial notification parameters are listed below for Children’s Behavioral Health Initiative (CBHI) services or Behavioral Health for Children & Adolescents (BHCA).

Phone:

MassHealth: 888-566-0010

Mass Clarity: 855-833-8120

Fax: 857-264-2673

Provider portal: [HealthTrio connect - Sign In](#)

Today’s date:	Date of intake:
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Member information

Member name (last name, first name middle initial)

Member ID#	Member date of birth (mm/dd/yyyy)
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Member address (street, city, state, zip code)

Member phone#:

Diagnosis: ICD-10 _____

Provider information

Agency name	NPI#
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Agency address (street, city, state, zip code)

Clinician name:

Phone:	Secure fax#:
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Check the appropriate level of care:

- Family Intensive Treatment (FIT) – Medicaid only
 - Submit notification via portal or fax within 3 business days of initiating services for an initial 7 days.
 - For continued Services, call the assigned reviewer to complete a medical necessity review for up to an additional 14 days.

- Family Stabilization Team (FST) – QHP plans only
 - Submit notification via portal or fax within 3 business days of initiating services for the initial 180 days.
 - For continued services, call the assigned reviewer to complete a medical necessity review.

- Intensive Care Coordination (ICC)
 - Submit notification via portal or fax within 3 business days of initiating services for an initial 45 days.
 - For continued services, call the assigned reviewer to complete a medical necessity review.

- In-Home Behavioral Services (IHBS)
 - Submit notification via portal or fax within 3 business days of initiating services for the initial 180 days.
 - For continued services, call the assigned reviewer to complete a medical necessity review.

- In-Home Therapy (IHT)
 - Submit notification via portal or fax within 3 business days of initiating services for the initial 180 days.
 - For continued services, call the assigned reviewer to complete a medical necessity review.