

## Submitting referrals the e-referral way

### Frequently asked questions for behavior health providers

- 1. What treatment settings are included under electronic behavioral health referrals?**  
E-referral currently accepts referrals for initial treatment visits in outpatient facilities and provider offices.
- 2. Can behavioral health providers submit a request on e-referral for ongoing outpatient treatment?**  
No, requests for services beyond those initially authorized should not be submitted through e-referral. Instead, providers should complete the [BCN Behavioral Health Outpatient Treatment Authorization Form](#) and fax it to the fax number listed on the form. This form can be accessed on the [ereferrals.bcbsm.com](http://ereferrals.bcbsm.com) Behavioral Health Web page.
- 3. Is there a standard date range for behavioral health referrals?**  
The end date possible for an authorization request may vary due to a member's contract year or other circumstances. If the e-referral system displays a warning when you enter an end date, simply enter another date that does not extend beyond the one the system gives you. The end date you enter may be adjusted by BCN Behavioral Health staff based on the member's specific contract and benefits.
- 4. What location type should I select?**  
If you are a provider office, select Provider Office. If you are an OPC affiliated with BCN, select O/P Facility.
- 5. What should I enter in the Attending Physician box?**  
If you are a provider office, enter the provider's NPI. If you are an OPC affiliated with BCN, enter NSLTREN, using all capital letters.
- 6. What is the default diagnosis code for mental health services?**  
The default diagnosis code for mental health services is 309.9.
- 7. What is the default diagnosis code for substance abuse?**  
The default diagnosis code for substance abuse is 292.9.
- 8. What is the default procedure code?**  
If you bill on a HCFA-1500 claim form, the default code\* is 90801. If you bill on a UB-04 claim form, the default code is revenue code 900.
- 9. When entering a referral, why do I see a warning that the submitting provider is not the PCP of record for the start date of the referral?**  
This message will always display when a referral is requested by a provider other than the member's primary care physician.
- 10. Can a referral be back-dated?**  
Yes, a referral can be dated one month prior to the date the referral is submitted. For more than one month, call Provider Inquiry at 1-800-688-3290 to discuss the case.

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