

Multi-Session Mental Health Assessments

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in consultation with Washington Health Care Authority - Division of Behavioral Health and Recovery

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Overview

One of the goals of the Mental Health Assessment for Young Children (MHAYC) policy is to expand the use of multi-session assessments, which are considered a best practice for children under age six. The policy allows providers to provide multi-session assessments, up to 5 total sessions, for children under age 6, without the need for prior authorization. This limit is reset each calendar year, to align with common prior authorization practices.

Conceptually, the multi-session mental health assessment rate is the percentage of Apple Health-enrolled clients who receive a mental health assessment over multiple sessions with the same mental health provider. As operationalized, the MHAYC project measure considers all Apple Health-enrolled clients who receive an initial mental health assessment session in a year and tabulates the percentage who receive at least one additional assessment session within 90 days of the initial assessment.

This document provides the definitions for this measure, as well as information about related measures. It also compares the MHAYC evaluation project measure to the definition of multi-session assessment used for Apple Health billing purposes at the Health Care Authority.

Unit of Measurement

Percentage of eligible population

Measurement Period

Ninety days prior to the beginning of each calendar year to 90 days after the end of each calendar year

Data Source

ProviderOne administrative claim and encounter data

Reporting Lag

Six months to account for data entry and maturity

Calculation

Percentage = Numerator / Denominator * 100

Eligible Population (Denominator)

Clients who were Apple Health-enrolled for at least 1 month of the calendar year and who received at least one mental health assessment session during the calendar year.

Numerator

Clients in the denominator who received an additional mental health assessment session with the same billing provider within 90 days of the initial mental health assessment session.¹ The 90-day window can include adjacent calendar years (see Figure 1 for visual representation of this measurement window).

Ninety days was chosen as the multi-session assessment window based on consultation with a clinical Infant-Early Childhood Mental Health expert at HCA, as well as guidance within HCA's [Behavioral Health Data Guide](#).²

Mental Health Assessments. Mental health assessments are identified in claims and encounters using procedure codes:

- 90791 (psychiatric diagnostic evaluation),
- 90792 (psychiatric diagnostic evaluation with medical services), and
- H0031 (mental health assessment, by non-physician).

Initial Mental Health Assessment Session. The earliest mental health assessment session in a calendar year that is not preceded by a prior assessment session with the same billing provider in the prior 90 days. When a client received mental health assessment sessions with multiple billing providers, the billing provider with the most assessment sessions is chosen, and then the earliest assessment session with that provider used as the initial mental health assessment session.

Billing Providers. Billing providers are identified using the billing provider national provider identifier (NPI).

The billing provider is the entity responsible for billing for the healthcare service provided. The billing provider may be a facility/agency, group practice, or solo/individual practice. In comparison, the servicing (or rendering) provider is typically the individual provider who delivers the health care services directly to the patient. The billing provider and the servicing provider for any service may or may not be the same. Billing provider is used for this measure because different individual mental health practitioners from a single agency or entity may participate in a single multi-session assessment episode for a child.

Related measures: Number of Assessments Sessions

For young children, while multi-session assessments are considered a best practice, more specifically, a best practice multi-session assessment would involve 3-5 sessions. In addition to developing the binary measure of assessments with multiple (more than one) sessions, a measure to categorizes clients by the number of assessment sessions received was also developed.

While current analyses indicate that multi-session assessments rarely include more than two assessment sessions, multi-session assessments of more than two sessions may become more prevalent in the future as the Mental Health Assessment for Young Children policy work continues.

¹ RDA also tested a separate measurement strategy that used a window of 90 days from each assessment, instead of a single 90 day window from the first assessment. This strategy produced almost identical results: the same number of 2-session assessments, only 3 additional 3 or more session assessments, and a 0.1% percentage point increase in the percent of assessments that were considered multi-session. Given the complexity of multiple additional windows and lack of appreciable increase in identification of multi-session assessments, we elected not to use this strategy.

² Appendix K: Closing Service Episode of Care Guidance in the Behavioral Health Data Guide, states that for Mental Health services, if an Enrollee (i.e., client) has not actively participated in treatment, HCA recommends closing the service episode after more than 90 days of no contact.

Unit of Measurement

Percentage of clients with 2-session, 3-session, 4-session, or 5 or more session assessments

Measurement Period

Ninety days prior to the beginning of each calendar year to 90 days after the end of each calendar year

Data Source

ProviderOne administrative claim and encounter data

Reporting Lag

Six months to account for data entry and maturity

Calculation

Percentage = Numerator / Denominator * 100

Eligible Population (Denominator)

Clients who were Apple Health-enrolled for at least one month of the calendar year and who received at least one initial mental health assessment during the calendar year

Numerator

2-session: Clients in the denominator who received ONE additional mental health assessment session from the same billing provider within ninety days of the initial assessment

3-session: Clients in the denominator who received TWO additional mental health assessment sessions from the same billing provider within ninety days of the initial assessment

4-session: Clients in the denominator who received THREE additional mental health assessment session from the same billing provider within ninety days of the initial assessment

5 or more session: Clients in the denominator who received FOUR OR MORE additional mental health assessment session from the same billing provider within ninety days of the initial assessment

Related measures: Use of the 53 modifier

Providers billing using HCA's Service Encounter Reporting Guide (SERI) are instructed to code multi-session assessments with the modifier "53"³. While not all Apple Health mental health providers bill using SERI, analysis was conducted to explore whether use of the 53-modifier code could effectively indicate a multi-session assessment. While use of the 53 modifier for multi-session assessments increased over time, by 2023, only 62% of multi-session assessments were marked with a 53 modifier. This analysis suggests that use of the 53 modifier is not a reliable indicator of multi-session assessments currently, but future review of this measure may be warranted.

³ Providers billing under the Apple Health Mental Health Billing Guide are not instructed to use the 53 modifier for this purpose.

Comparison to the Definition of Multi-session Assessments Used for Apple Health Billing

The definition of multi-session assessments used for Apple Health billing includes clients who receive at least 2 assessment sessions from the same billing provider in the same calendar year. This definition was constricted to align well with prior authorization practices but is not well-aligned with clinical practice, where sessions within the same assessment may cross calendar years. In addition, sessions that occur within the same calendar year may not always be part of the same assessment; when there are extended time periods between assessment sessions, this may more accurately represent a separate assessment (i.e., a separate entry into services). The MHAYC evaluation project measure for multi-session assessment, as defined above, addresses these issues by adjusting the definition to include 90-day windows on either side of a billing event in the calendar year to determine which events are initial events; the 90-day windows can include adjacent calendar years.

Public reporting of data using the Apple Health billing definition has been limited; the comparisons in the tables and figures below are provided to demonstrate the differences between the new MHAYC evaluation project measure and existing Apple Health billing policy definitions.

Figure 2 displays calculations for the MHAYC evaluation project measure of multi-session assessment and Apple Health definition of multi-session assessment by calendar year. Results indicate that MHAYC measure estimates are slightly lower than the Apple Health definition estimates, due to imposing a 90-day window when identifying an assessment span. The MHAYC evaluation project measure provides a slightly more conservative estimate, but is also likely a more accurate reflection of clinical practice for mental health assessments for young children.

	MHAYC Evaluation Project Measure	Apple Health Billing Definition
Unit of Measurement	Percentage of clients with a multi-session mental health assessment	Percentage of clients with a multi-session mental health assessment
Measurement Period	Ninety days prior to the beginning of each calendar year to 90 days after the end of each calendar year	Beginning to end of each calendar year
Denominator	Clients who were Apple Health-enrolled for at least one month of the calendar year and who received at least one initial mental health assessment during the calendar year	Clients who were Apple Health-enrolled for at least one month of the calendar year who received at least one mental health assessment during the calendar year
Numerator	Clients in the denominator who received an additional mental health assessment session from the same billing provider within ninety days of the initial assessment	Clients in the denominator who received an additional mental health assessment session from the same billing provider within the same calendar year

Figure 1

Comparison of MHAYC Evaluation Project Measure and Apple Health Billing Definition of Multi-Session Assessment

A child received their first mental health assessment of 2021 on June 1st, 2021. To determine if this assessment was carried out over multiple sessions, the **Apple Health Billing** definition examines whether additional mental health assessments with the same billing provider occurred between January 1st, 2021 and December 31st, 2021. The **MHAYC Evaluation Project** measure examines whether any additional mental health assessments with the same billing provider occurred within ninety days of the index assessment, or through August 29th, 2021. Since the next mental health assessment took place on November 1st, 2021, the case is counted as a multi-session assessment in the Apple Health billing definition but not the MHAYC Evaluation Project measure.

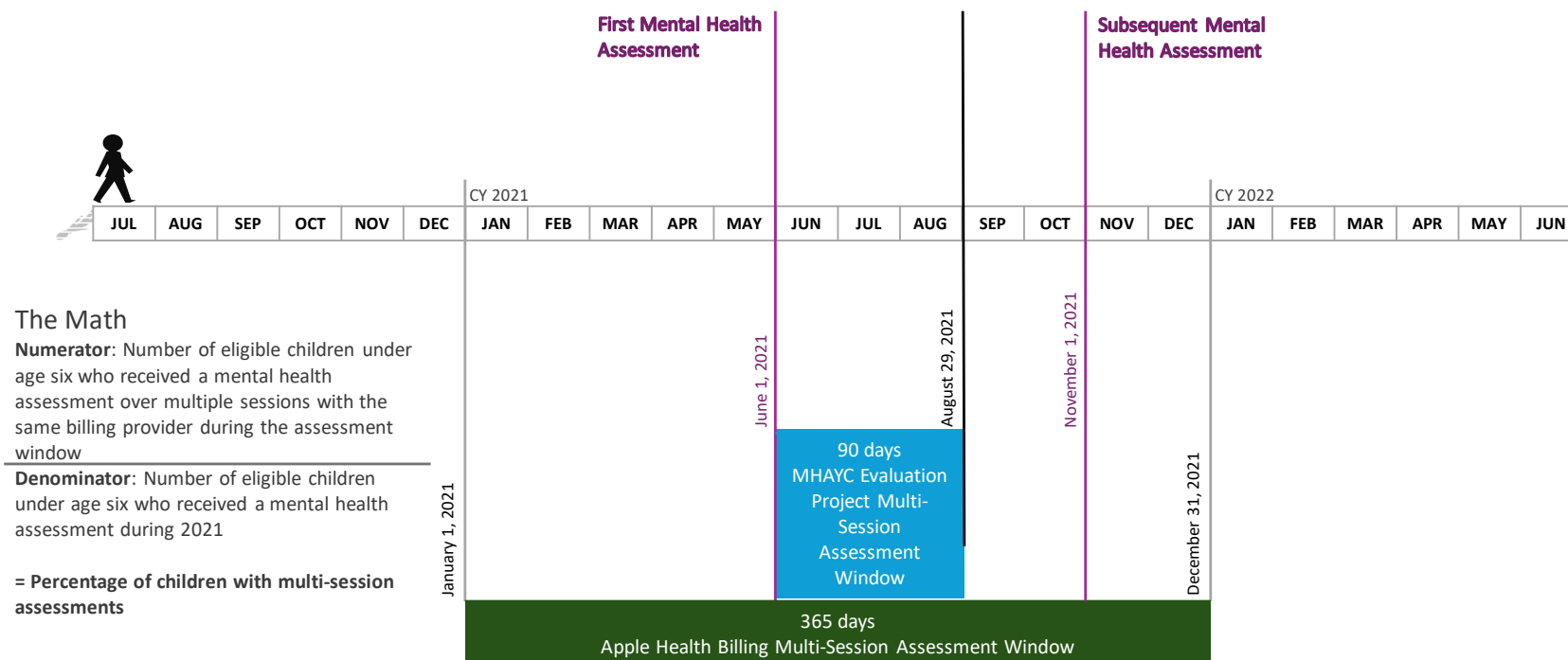


Figure 2

