

BHI COLLABORATIVE PRESENTS

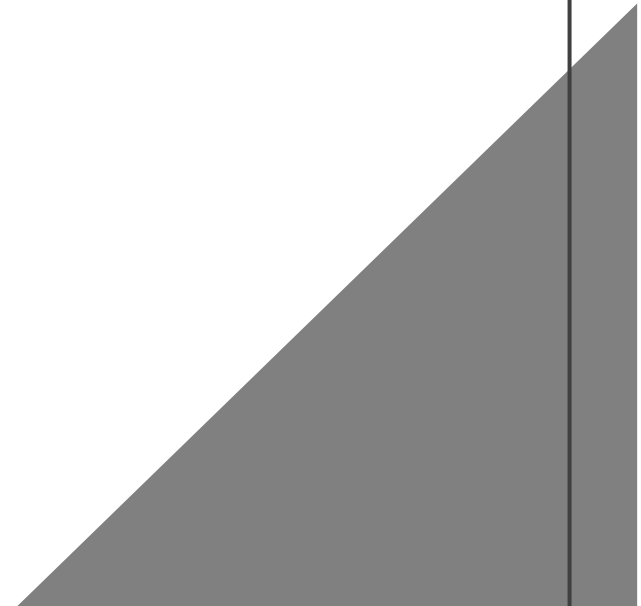
OVERCOMING OBSTACLES WEBINAR SERIES

**Sustaining behavioral
health care in your practice**

October 6, 2020

Overcoming Obstacles Webinar Series

This series is focused on enabling physicians to sustain a collaborative, integrated, whole-person, and equitable approach to physical and behavioral health care in their practices during the COVID-19 pandemic and beyond.



About the BHI Collaborative

*The BHI Collaborative was established by several of the nation's leading physician organizations** to catalyze effective and sustainable integration of behavioral and mental health care into physician practices.*

With an initial focus on primary care, the Collaborative is committed to ensuring a professionally satisfying, sustainable physician practice experience and will act as a trusted partner to help overcome the obstacles that stand in the way of meeting patients' mental and behavioral health needs.

***American Academy of Child & Adolescent Psychiatry, American Academy of Family Physicians, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American College of Physicians, American Medical Association, American Osteopathic Association, and the American Psychiatric Association.*

TODAY'S TOPIC:

***Behavioral Health Billing & Coding 101:
How to Get Paid***

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TODAY'S SPEAKERS



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Senior Practice Manager of
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Northwestern Medicine



Behavioral Health Integration Presentation: Behavioral Health Billing & Coding 101 How to Get Paid

**Leslie Prellwitz, MBA, CCS, CCS-P
Director, CPT Content Management & Development
October 6, 2020**

The Continuum

Co-located model

Onsite behavioral health clinicians provide enhanced access within physician practices

Collaborative care model

Offsite behavioral health clinicians (usually psychiatrists) supervise onsite care managers who help nonbehavioral health clinicians meet their patients' behavioral health needs

Source: Malatre-Lansac A, Engel C, Xenakis L, Carlasare L, Blake K, Vargo C, Botts C, Chen P, & Friedberg M (July 2020). Factors Influencing Physician Practices' Adoption of Behavioral Health Integration in the United States: A Qualitative Study. *Annals of Internal Medicine*, 173(2), 92-100.

CPT® Codes Across the Continuum

Co-Location

Collaborative Care

Preventive Medicine

99401, 99402, 99403,
99404, 99411, 99412

Behavior Change Interventions

99406, 99407, 99408,
99409

Psychotherapy

90832, 90833, 90834,
90836, 90837, 90838

Developmental / Behavioral Screening

96127

Adaptive Behavior services

97151, 97152, 97153,
91754, 97155, 97156,
97157, 97158

Health Behavior Assessment and Intervention

96156, 96158, 96159,
96160, 96161, 96164,
96165, 96167, 96168,
96170, 96171

General Behavioral Health Integration Care Management

99484

Psychiatric Collaborative Care Management

99492, 99493, 99494

Cognitive Assessment and Care Plan Services

99483

CPT® Code Overview – Towards Co-Location

Co-Location



Collaborative Care

Engage patients earlier in the care continuum
Easier to incorporate in smaller settings

Counseling Risk Factor Reduction and Behavior Change Intervention

- Preventive Medicine
 - 99401, 99402 99403, 99404 (Individual)
 - 99411, 99412 (Group)
- Behavior Change Interventions
 - 99406, 99407 Smoking and tobacco use cessation counseling visit
 - 99408, 99409 Alcohol and/or substance (other than tobacco) abuse structured screening, brief intervention (SBI) services

CPT® Code Overview – Towards Co-Location

Co-Location



Collaborative Care

Behavioral health focus, not requiring larger collaboration
Psychotherapy – options for inclusion in patient care episode

Psychotherapy

- 90832, 90834, 90837 Psychotherapy (30, 45, 60 min)
- 90833, 90836, 90838 Psychotherapy when performed with E/M service

Developmental / Behavioral screening

- 96127 Brief emotional/behavioral assessment (e.g., depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument

CPT® Code Overview - Assessments

Co-Location



Collaborative Care

Clear focus on behavioral health
Broader range of roles (Physician/QHP vs. technician)

Adaptive Behavior Services

- 97151, 97152 (Assessment), 97153-97158 (Treatment)
- Address deficient adaptive behaviors, maladaptive behaviors, or other impaired functioning secondary to deficient adaptive or maladaptive behaviors (e.g. instruction-following, verbal and nonverbal communication, imitation, play and leisure, social interactions, self-care, daily living, personal safety)

Health Behavior Assessment and Intervention

- 96156-96171 (Individual, Group, Family)
- Focus on psychological, behavioral, emotional, cognitive, and interpersonal factors complicating medical conditions and treatments

CPT® Code Overview – Care Management

Co-Location

 Collaborative Care

Expansive coordination model

Report over extended period (per calendar month or longer)

Care Management

- 99484 General Behavioral Health Integration Care Management
- 99492-99494 Psychiatric Collaborative Care Management

*Not Behavioral Health
Focused:*

Chronic Care Management
(99490, 99491)

Complex Chronic Care
Management (99487, 99489)

Cognitive Assessment and Care Plan Services, 99483

- Provided when a comprehensive evaluation of a new or existing patient, who exhibits signs and/or symptoms of cognitive impairment, is required to establish or confirm a diagnosis, etiology and severity for the condition.
- Thorough evaluation of medical and psychosocial factors, potentially contributing to increased morbidity.

CPT® Codes: Telemedicine

Co-Location

Collaborative Care

Preventive Medicine

99401, 99402, 99403,
99404, 99411, 99412

Behavior Change Interventions

*99406, 99407, 99408,
99409*

Red- CPT® Appendix P
Green – CMS, during PHE

Psychotherapy

*90832, 90833, 90834,
90836, 90837, 90838*

Developmental / Behavioral Screening

96127

Adaptive Behavior Services

97151, 97152, 97153,
91754, 97155, 97156,
97157, 97158

Health Behavior Assessment and Intervention

96156, 96158, 96159,
96160, 96161, 96164,
96165, 96167, 96168,
96170, 96171

General Behavioral Health Integration Care Management

99484

Psychiatric Collaborative Care Management

99492, 99493, 99494

*Cognitive Assessment
and Care Plan Services*
99483

CPT® Codes: Internet / Virtual Visits

- 99452 Interprofessional Telephone/Internet/Electronic Health Record Referral Service(s)
- Telephone/Virtual Visits

	Physician / QHP	Qualified nonphysician (may not report E/M)
Telephone	99441 (5-10 min) 99442 (11-20 min) 99443 (21-30 min)	98966 (5-10 min) 98967 (11-20 min) 98968 (21-30 min)
Online Visits (eg EHR portal, secure email; allowed digital communication)	99421 (5-10 min) 99422 (11-20 min) 99423 (21 or more min)	98970 (5-10 min) 98971 (11-20 min) 98972 (21 or more min)



Collaborative Care Management Implementation

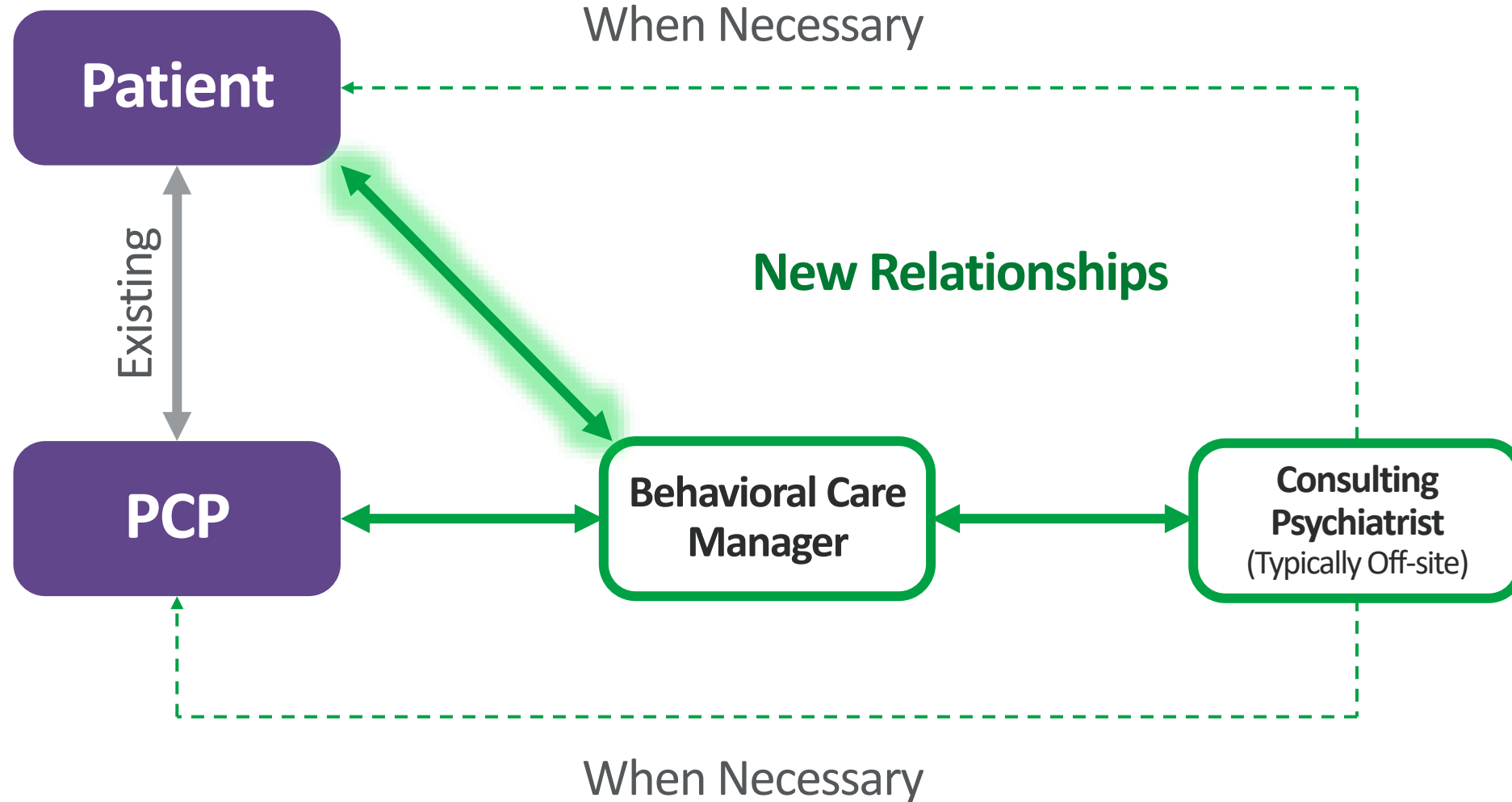
Lessons Learned at Northwestern Medicine

Presented by Jacob Atlas



Collaborative Care Management

Overview



Collaborative Care Management

Implementation Considerations

- Clinical Component

- **Operational & Financial Goals**

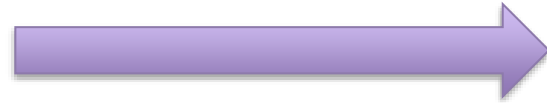


Collaborative Care Management

Keys to Achieving Operational and Financial Goals

Implementation Challenges:

- Adoption



Tools:

- Integration

of clinical, financial, and operation levers

- Expansion



- Automation

of all billing processes

Adoption Challenges

Facilitating Adoption of Billable Processes

Lessons from peers:

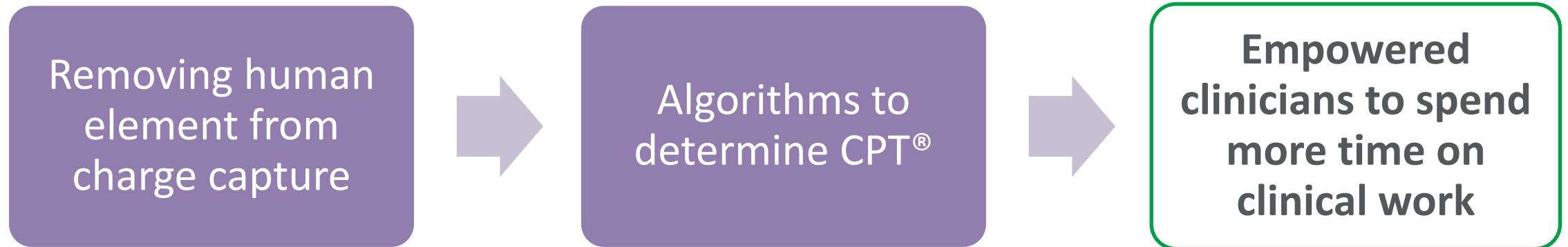
- *Avoid manual, time-intensive, non-value adding billing workflows*
- Simpler = more likely to adopt
- Solutions must fit the enterprise

Northwestern Medicine Solution:

- **Integrated** “time capture” feature
- Reduced “click fatigue”
- Leveraged necessary time capture workflow to drive performance measurement

Expansion Challenges

Automation of Billable Processes



Additional Considerations

- **Managed Care obstacles**
 - Contracting for services
 - Payer understanding and recognition of medical component
- **Patient impact of obtaining consent**

Northwestern Medicine Takeaways

- Tailor to fit organization's needs
- Remove 'burnout' factor
 - CoCM benefits patients AND Primary Care Providers...
 - ...Don't let billing get in the way of this benefit
- Integration is key
- Embrace what makes Collaborative Care Management different!



QUESTIONS?



OVERCOMING OBSTACLES WEBINAR SERIES

Sustaining behavioral health care in your practice

UPCOMING WEBINARS

Keys to Success: Implementation Strategies for Virtual Behavioral Health Integration

October 22, 2020, 7PM - 8PM CT

Physician experts will explore how physician practices can virtually support the behavioral health of their patients. Experts will examine when it is appropriate to employ video and/or telephonic telehealth technologies, and the steps needed to ensure they best support patients (adults, adolescents, and children) across a variety of care settings.

A dark, irregular ink blot with splatters on a white background. The blot is roughly circular but has jagged, feathered edges. The center is a solid dark grey, while the edges are lighter and more diffuse, with small droplets and splatters extending outwards. The overall effect is that of a fresh ink spill or a hand-drawn shape.

**Thank you for
joining!**