



# ***SAMHSA-HRSA Center for Integrated Health Solutions***

## **Supporting Bi-Directional Integration Through Potential Billing Opportunities: State-based Interim Billing Worksheets**

Presented by:

Kathleen Reynolds, LMSW, ACSW



# Overview

- Content of this Webinar
- Essential Nature of Billing and Reimbursement
- Billing and Coding Infrastructure
- Billing Opportunities in Public Sector Partnership
- State Based-Interim Billing Worksheets
- Using Billing and Claims Information for Quality Improvement

**Have a question? Use the Question Box.**



# Content of the Webinar

- A Basic Billing/Reimbursement Webinar
- Identifying Key Issues for All Providers
- Reviewing one tool that can facilitate discussion in your organization, partnership or state and help get you started in exploring billing for integrated care



## **Essential Nature of Effective Billing and Reimbursement**

- Impact of the third party payers/entities in the field
  - Managed Care Entities
  - Insurance Exchanges
  - Accountable Care Organizations
- Health Homes and innovative approaches by State Medicaid Agencies
- Revenue for the organization
- Data for Quality Improvement



# Billing and Coding Infrastructure

- Staffing – Sample of needed expertise
  - Chief Financial Officer
  - Payables and Receivables staff
  - Claims Processors
- Knowledge of Payer Requirements
  - Private Payers
  - Medicaid
  - Medicare
- Technology supports
- Accurate, good documentation of services



## **Potential Billing Opportunities in Partnership in the Public Sector**

- Two services in one day
- Health and Behavioral Assessment Codes – HBAI
- Maximizing who can bill for what, when and by whom



# Two Services in One Day

## ▶ Federal Citations:

- Medicare will cover a physical health and mental health visit same day/same provider – CFR Title 42 Volume 2, Part 405. Section 405.2463
- Medicaid - a state by state Medicaid issue, not a federal rule or regulation





## Two Services in One Day

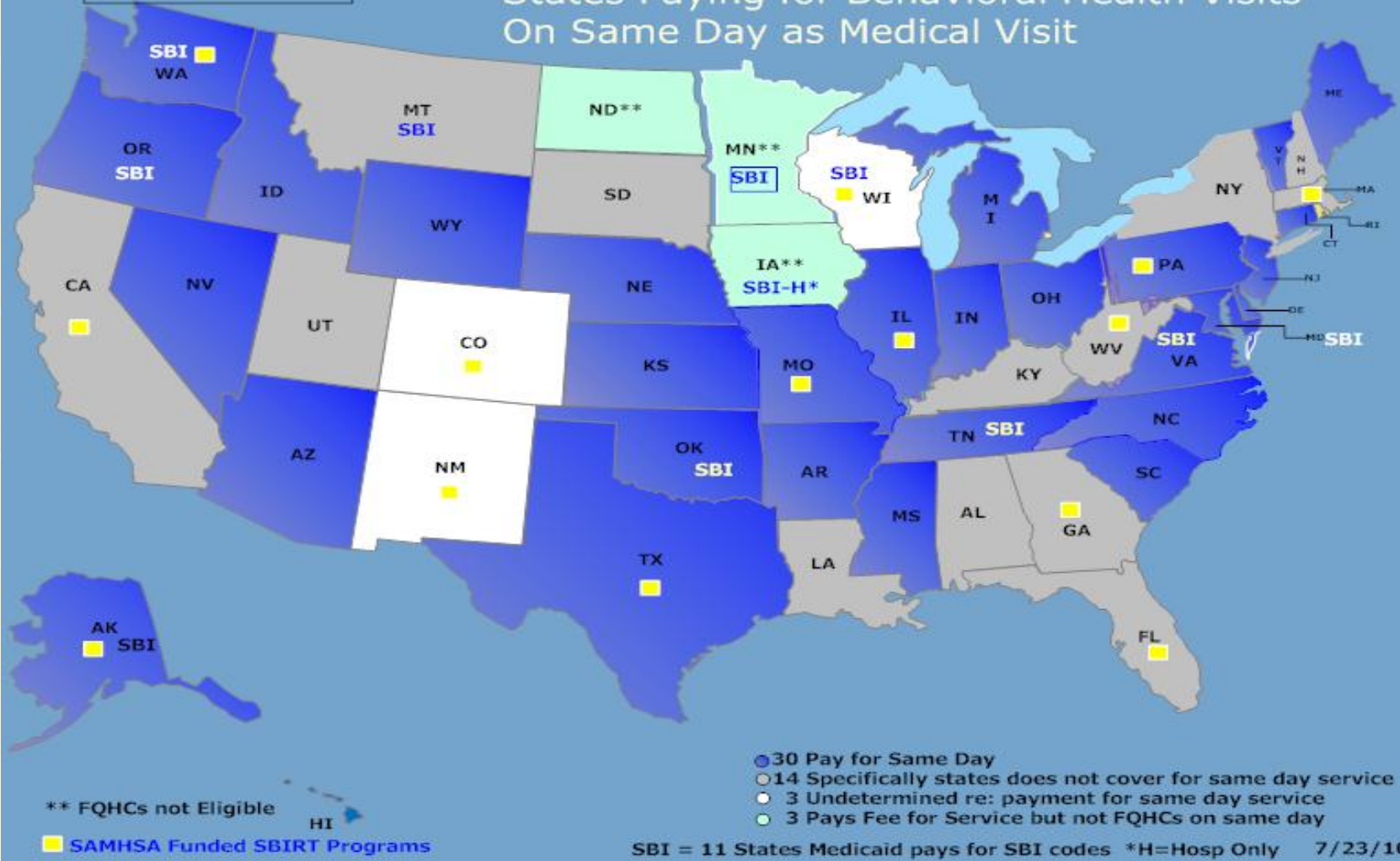
- Medicaid is currently paying for two services in in one day for FQHCs in 28 states
- Two providers can bill for the services they provide on the same day – Contractual Business Model
  - Behavioral Health Provider bills for BH service under their provider number
  - Primary Care bills for their services under their provider number





NACHC Survey 2007 +  
 SAMHSA update / 2010

States Paying for Behavioral Health Visits  
 On Same Day as Medical Visit

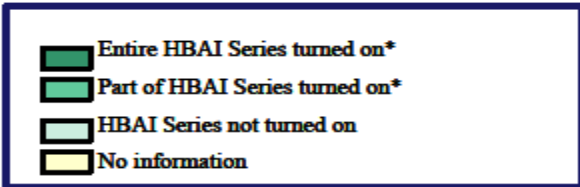
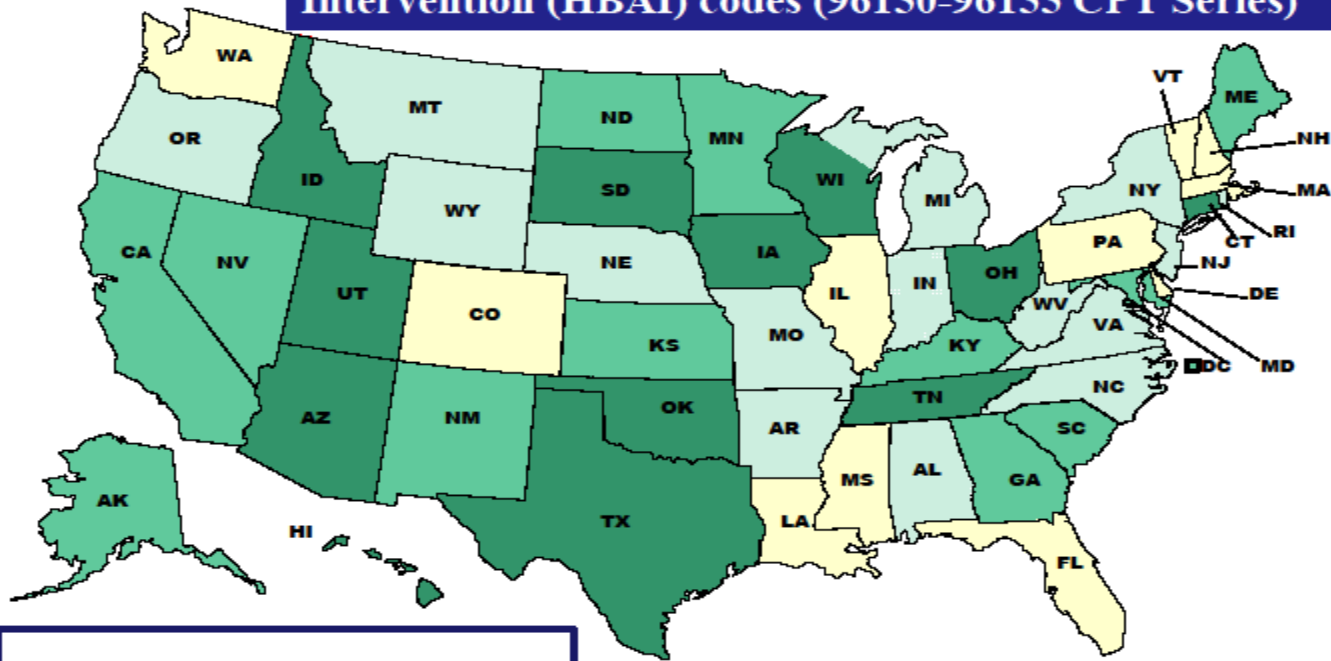


## The Health and Behavior Assessment/Intervention Codes (96150 - 96154)

- Approved CPT Codes for use with Medicare right now
- Some states are using them now for Medicaid
- Behavioral Health Services “Ancillary to” a physical health diagnosis
  - Diabetes
  - COPD
  - Chronic Pain



**States use of Medicaid's Health and Behavior Assessment/  
Intervention (HBAI) codes (96150-96155 CPT Series)**



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## Maximizing Who Can Bill, for What, and By Whom

- Reimbursable bill must have three things:
  - The correct CPT Code
  - Correct Diagnostic Code
  - Be provided by the appropriately credentialed staff person



# Maximizing Who Can Bill, for What, and By Whom – Interim Billing Worksheets

## What are the Interim Billing Worksheets?

- Point in time review of each states Medicaid program on what may or may not be reimbursable in your state for integration using currently available codes
- Point in time review of Medicare reimbursement
- Link CPT, Diagnostic Code and Credential
- One of many tools – an place to start the conversation and billing locally and in a state
- Do not **GUARANTEE** you will be paid based on the worksheet



# Interim Billing Worksheet – Screen Shot





## Resources

Worksheets Available at:

[www.integration.samhsa.gov](http://www.integration.samhsa.gov)

Kathy Reynolds, LMSW, ACSW

[kathyr@thenationalcouncil.org](mailto:kathyr@thenationalcouncil.org)

734.476.9879

