



SAMHSA-HRSA Center for Integrated Health Solutions

Billing Primary Care When You Are a Behavioral Health Center

Presented by:

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Overview

- Review of Billing for Behavioral Health Organizations providing Medical Services Directly but not an FQHC or FQHC Look-Alike
- As with all billing, often state specific
- Overarching Concepts
- Grantee Experiences



General Criteria – Medicaid & Medicare

- Often states require a separate Medicaid number for primary care billing – often cannot use your behavioral health provider number
- To get a new Medicaid number, you need to get a new Medicare number first
- Often need to get a Medicaid cohort/panel of patients assigned to your clinic



Private Payers

- Need to get on provider panels for primary care
- Need to get medical staff credentialed for all providers
- May need authorizations
- May need accreditation (AACF)



Grantee Experiences with These Steps

- Kathy Bianco – Care Plus, NJ
- Jon Garey – Community Support Services, Ohio
- Don Thacker – Shawnee Mental Health Center, Ohio



Actual Billing Processes

- **Good News**
 - With HIPAA, usually same forms as behavioral health
- **Bad News**
 - Expand billing capacity to primary care codes – Jon Garey
 - Expand billing capacity – Jon Garey
 - The Super Bill – Kathy Bianco



QUESTIONS? OTHER EXPERIENCES?

