Billing & Reimbursement of Integrated Health Services “An Introductory”

Presented by:
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Overview

- Billing and Financing topics have been one of the top requests for Training and Technical Assistance by grantees
- Basic information on the key areas to consider for reimbursement opportunities for your organization
- An exploration of grantees current billing and reimbursement practices
- Future steps related to billing and reimbursement Training and Technical Assistance for grantees
Poll Question # 1

Does your behavioral health center do any third party billing for services provided?

_____ Yes

_____ No

_____ Don’t Know
Poll Question # 2

Is your behavioral health organization (CMHC or Addiction Specialty Program) billing for any services provided under the PBHCI grant?

_____ Yes

_____ No

_____ Don’t Know
Poll Question # 3

Is your FQHC/medical partner billing for any of their services provided under the PBHCI grant?

____ Yes

____ No

____ Don’t Know
Poll Question # 4

Is your PBHCI grant providing reimbursement to the FQHCs or other medical providers for health care services provided to individuals who have some type of insurance?

_____ Yes

_____ No

_____ Don’t Know
Poll Question # 5

Is your PBHCI grant paying for health care services for indigent individuals?

____ Yes

____ No

____ Don’t Know
Expectations of the Grant to Bill for Third Party Reimbursements

- If you are serving individuals who have Medicaid, Medicare or other third party payers, you should be billing the third party payer for those services and including that revenue as part of your PBHCI budget.

- This is critical to financial sustainability once the grant period ends. Who bills for what service, when is a critical discussion needed for everyone to have?
Rationale for the Billing Discussion

- FQHC’s bill by encounter rates and receive the same amount of funding for a 10 minutes visit as they do for a 1 hour visit.
- Advantages to having FQHC bill for psychiatrists and credentialed practitioners.
- CMHC’s can bill for case management which FQHC’s often cannot.
- By collaborating and having discussions about who bills for what medically necessary services, third party revenue for integration can be enhanced.
Basic Principles of Billing and Reimbursement

- Key pieces of information an organization needs to know to maximize reimbursable services
  - Medicaid Provider billing type (FQHC, CMHC or other)
- A successful bill requires three key pieces of information
  - CPT Codes (current Procedural Terminology)
  - Diagnosis of the individual
  - Licensure and Credential of practitioner
Interim Financing & Billing Worksheets

- These worksheets are designed to help agencies understand the series of factors to consider in their state, when billing for integrated health services using the public safety net system.
  - Type of Agency (FQHC, CMHC)
  - Funding Source (Medicare, Medicaid)
  - CPT Code
  - Diagnosis
  - Practitioner Discipline & Credential

- The worksheets will be posted on the CIHS website under Finance as they are completed.

www.integration.samhsa.gov/
Basic Principles of Billing and Reimbursement (con’t)

● CPT Codes (Current Procedural Terminology)
  – Evaluation and Management Codes (E&M)
    • Is generally billed by an FQHC or Medical Facility and must have a physical health diagnosis
  – Health & Behavior Assessment Codes (HAB)
    • Can only be billed by an FQHC or Medical Facility and must have an accompanying physical health diagnosis
    • Used to identify the psychological, behavioral, emotional, cognitive and social factors important to the prevention, treatment, or management of physical health problems. The focus is not on mental health, but on the biopsychosocial factors important to physical health problems and treatments.
    • Depending on the state the E&M and HAB codes can be billed on the same day
Basic Principles of Billing and Reimbursement (con’t)

- **CPT Codes** (Current Procedural Terminology)
  - **Behavioral Health Codes 908xx series (MH & SU)**
    - Traditional behavioral codes by an acceptable licensed and credentialed practitioner for that state and setting (Physician, Nurse Practitioner, Masters Social Worker, PhD Psychologist)
  - **Telemedicine** (usually the same code as face to face service with a modifier)
    - Typically these services are billable by an acceptable licensed and credentialed practitioner for that state and setting
  - **Case Management**
    - Can only be billed by an acceptable licensed and credentialed practitioner for that state and setting
    - Generally a CMHC service
POLL QUESTIONS # 6 and 7

Does your agency currently have an identified billing and claims experts?

a. Yes  
b. No  
c. Don’t Know

Does your agency currently use an Electronic Health Record to capture services delivered?

a. Yes  
b. No  
c. Don’t Know
CIHS Next Steps

- **Phase I - Today's Webinar**
- **Phase II**
  - Based on the Polling Question Responses, CIHS will set up a series of Special Interest Calls of short term, topic specific learning communities for:
    - All those that are currently not billing
    - Problem solving for those who are billing but not receiving payment
    - Advanced, maximizing revenue
- **Phase III**
  - This area will be a key topic during the next round of Learning Communities
- **On-Going**
  - As Interim Billing and Finance Worksheets become available, they will be posted to the CIHS website [www.integration.samhsa.gov/](http://www.integration.samhsa.gov/)
  - Targeted Technical Assistance to grantees upon request
    - Strategizing and Planning around Billing & Reimbursement
    - Workflow & Process Mapping
    - Use of Health Information Technology (EHRs)
    - Other areas as identified
Poll Question # 8

I think we’d like to participate in the following short term, specific Learning Community:

- Billing Basics – for those not currently billing
- Problem Solving Billing issues
- Advanced/Enhancing revenue for integrated services
- All three
Download Billing tools

Go to www.integration.samhsa.gov/financing/billing-tools

Click on the files at the bottom of this page to download the following state billing tools.

• Arizona Billing and Financial Worksheet
• Georgia Billing and Financial Worksheet
• Louisiana Billing and Financial Worksheet
• Maryland Billing and Financial Worksheet
• Nebraska Billing and Financial Worksheet
• Ohio Billing and Financial Worksheet
• Pennsylvania Billing and Financial Worksheet
• Texas Billing and Financial Worksheet
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SAMHSA/HRSA Center for Integrated Health Solutions

The resources and information needed to successfully Integrate primary and behavioral health care

For information, resources and technical assistance contact the CIHS team at:

Online: www.integration.samhsa.gov/
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Email: Integration@thenationalcouncil.org