

Project funded by the Colorado Department of Healthcare Policy and Finance per House-Bill 22-1302 Healthcare Practice Transformation



# 1302 Practice Business Operations Learning Community

May 23, 2024





#### Welcome!

Please put your name, pronouns, practice name, and role in the chat.

You can ask questions via the chat we will monitor it as we go along. We will also pause for questions periodically.

These slides and the recording will be made available on the <a href="Practice Innovation Program website">Practice Innovation Program website</a>.

https://medschool.cuanschutz.edu/practiceinnovation-program/current-initiatives/1302behavioral-health-integration/for-practices



# Behavioral Health Integration: Leasing Models

Lisa Rothgery, MD 5/23/24

## Agenda

- Evaluate the barriers to behavioral health integration
- Review how leasing models can support behavioral health integration
- Review leasing resources
- Review payment models for behavioral health integration
- Introduction to Parent Family Wellness Center Emily Horowitz, LPC
- •Q&A

## Value-Based Impact of Integrated BH

- Improves access to care
- Increases patient utilization of psychotherapy services
- Improves patient outcomes
- Decreases medical cost across the healthcare delivery system
- Improves care team experience
- Improves patient experience



# Barriers to Behavioral Health Integration

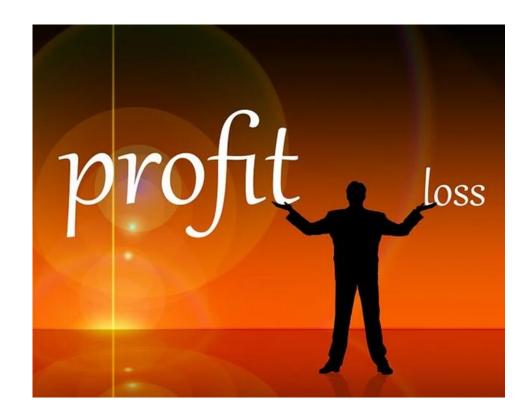
- Therapist/counselor availability
- Psychiatric med management availability
- Support staff availability (Care coordinator, BHRN, etc)
- Cost up front costs and long term maintenance
- Varied patient needs
  - Addiction/substance use, anxiety, depression, ADD behavior modification, neuropsych evaluation, testing support, medication management, EMDR, CBT, couple or family counseling....

### Sustainability

- Limited supply of therapists and psychiatric providers
- Small practices may not have the patient volume to support a full time therapist

Solution

**Leasing Arrangements** 



### **Leasing Models**

- Only contract for the hours you need
  - Grow as your need grows
  - Therapist can provide care for multiple practices
- Immediately sustainable
  - Every hour you pay for you are also billing
  - Therapist is employee of leasing group
    - You pay an hourly rate and they pay therapist salary and benefits
    - Same therapist is always in your practice
      - Appear to patients as your practice employee

### **Leasing Model In Action**

- contract 4 hours per week  $4hr \times $90/hr = $360$
- Bill 4 hours of CoCM (average \$130/hour)
   4hr x \$130/hr = \$520

#### Don't Forget Overhead!!!

Make sure the leasing hourly rate is less than (reimbursement –overhead)

#### Overhead:

- Psychiatrist
- EHR/Telehealth platform
- Screening software
- Billing team cost
- Lost income if using a medical provider room to provide BH services

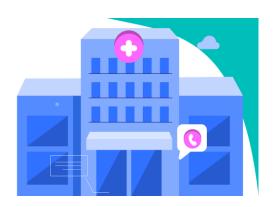
### **Additional Benefits**

- Utilize therapists with different skill sets
  - Pediatric specialist
  - Couple and family counseling
  - Geriatric specialist
  - Addiction/substance use support
  - EMDR
  - CBT
- Improved psychiatrist access (if using CoCM)
  - Curb consults
  - Referrals

# Who can you build a leasing agreement with?

- Therapist groups
- Psychiatrist groups
- Groups with both therapy and psychiatry support
- Independent therapists/psychiatrists







Beware of groups offering leasing programs at unsustainable rates.

#### **Choose Your Own Adventure**

- Contract the hours you need
- Telehealth, in person or both
- Rigid or flexible schedules
- Different provider types
  - O CAC, LPC, LCSW, LMFT, psyD,
  - Even provisionally licensed
    - With supervision
- Different provider specialties



# **Plug and Play**

Clinical Director Emily Horowitz, LPC, PHM-C, CPP-S emily@parentfamilywellness.com

For inquiries and patient referrals:

info@parentfamilywellness.com

303-955-6809

parentfamilywellness.com



#### **Additional Resources**

- Higher Sites (May be cost prohibitive)
  - Offer therapist AND psychiatric CoCM support
  - Can also refer patients to them
  - https://www.highersightscounseling.com/
  - Contact: Lindsay Bishop lindsay@highersightscounseling.com
- Talkiatry
  - National Virtual Psychiatry Group
    - Can refer patients now. See patients in 3 days or less.
    - Working on a psychiatrist leasing model
    - talkiatry.com
- Sondermind
  - Therapist clearing house for referrals
  - Will provide leased psychiatrist hours as available
  - sondermind.com
  - Contact: Jacqueline Longmire jlongmire@sondermind.com

### **LIN Health**

- Will contract with you through the CoCM model or you can just refer
- Groundbreaking chronic pain BH program
  - Pain reprocessing program

- Contact: Suzanne Falaschetti <u>suzanne.falaschetti@lin.health</u>
- https://www.lin.health/

### **Be Proactive**

- University of Denver school of social work
  - Integrated BH training program
  - Alumni and students
  - Contact: Stacy Said, MSW Stacy.Said@du.edu
- Psychology today
  - Reach out to people in private practice. Often looking to supplement private practice with hours in your practice.
  - https://www.psychologytoday.com/
- Large BH providers/centers/hospitals

### **Virtual Staff Support**

- Can also utilize virtual leasing groups to support BH management
  - Ex. Lease a virtual MA to do care coordination

- Core Virtual Solutions
  - https://corevirtualsolutions.com
  - Edge
    - https://onedge.co



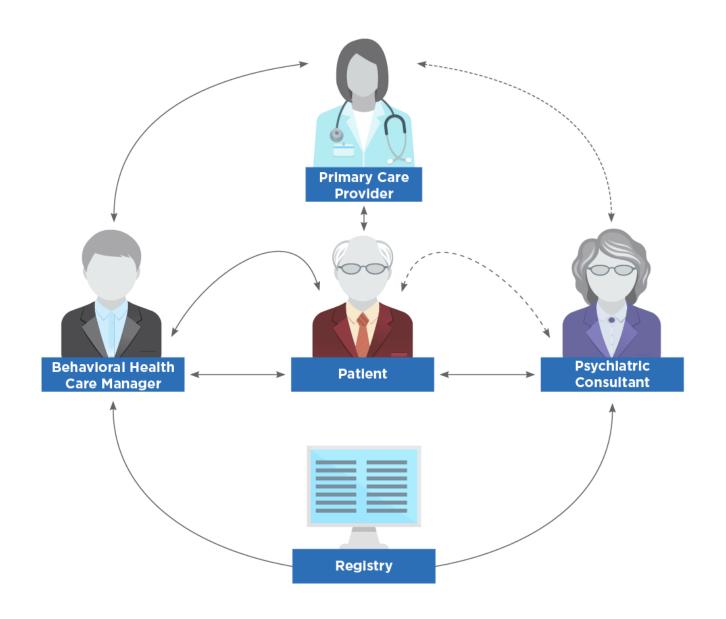
### **Integration Payment Options**



- Collaborative Care Model (CoCM)
- Traditional FFS psychotherapy codes
- Incident to (Medicare Only)
- Substance use bundled codes
- Value based payments
- Grant dollars

### **Collaborative Care Model (CoCM)**

- Coverage started with CMS in 2017
- Requires a team of providers PCP, BHCM, Psychiatric Consultant
- Reimbursement is based on time about 2 hours per month
  - Average reimbursement = \$130/hour
- Therapists do not need to be credentialed
  - Codes are billed under the PCP



#### **Collaborative Care Resources**

APA:

<a href="https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care/learn">https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care/learn</a>

University of Washington AIMS Center:

https://aims.uw.edu/collaborative-care/

### **Collaborative Care Codes**

99492: Used to bill the first 70 minutes in the first initial month of collaborative care.

- i. Initial psychiatric collaborative care management, first 70 minutes in the first calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified healthcare professional, with the following required elements:
  - 1. Outreach to and engagement in treatment of a patient directed by the treating physician or other qualified healthcare professional;
  - 2. Initial assessment of the patient, including administration of validated rating scales, with the development of an individualized treatment plan;
  - 3. Review by the psychiatric consultant with modifications of the plan if recommended;
  - 4. Entering patient in a registry and tracking patient follow-up and progress using the registry, with appropriate documentation, and participation in weekly caseload consultation with the psychiatric consultant; and
  - 5. Provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies.

### **Collaborative Care Codes Continued**

99493: First 60 minutes in any subsequent months of collaborative care

99494: Each additional 30 minutes in any month

- 1. Can be used in conjunction with 99492 or 99493
- 2. Can be billed twice per month for most payers

Cannot exceed 2 hours in a month.

# Remember: Must hit halfway time point

99492 - 70 minutes.

Spend less than 36 minutes cannot bill.

36-85 minutes = 99492.

86-115 minutes = 99492 + 99494

116 min or more = 99492 + 99494 + 99494

Subsequent months - 1st code is only 60min

Less than 31 min-cannot bill.

31 min - 75 min = 99493

76 min - 105 min = 99493 + 99494

106 min or more = 99493 +99494 + 99494



### **FQHC and RHC Codes**

G0512. Psychiatric Collaborative Care Model services: Minimum of 70 minutes in the first calendar month and at least 60 minutes in subsequent calendar months.

FQHCs and RHCs do not recognize the CPT time rule nor the add-on code for additional time.

 You must provide the full 70 (initial) or 60 (subsequent) minutes before billing for the service and sites are not paid for any additional time.

## **General Care Management Services**

99484 - Care management services for behavioral health conditions, at least 20 minutes of clinical staff time, directed by a physician or other qualified healthcare professional, per calendar month, with the following required elements:

- Initial assessment or follow-up monitoring, including the use of applicable validated rating scales;
   Behavioral health care planning in relation to behavioral/psychiatric health problems, including revision for patients who are not progressing or whose status changes;
   Facilitating and coordinating treatment such as psychotherapy, pharmacotherapy, counseling and/or psychiatric consultation; and
   Continuity of care with a designated member of the care team

#### FQHC and RHCs:

G0511 – General Care Management Services: Minimum of 20 minutes per calendar month.

G0511 may only be billed once per month per beneficiary and may not be billed if other care management services such as transitional care management or home health care supervision are billed for the same time period.

## **Psychotherapy Codes**

- Pro:
  - Traditional FFS billing based on appointments

- Con:
  - Need to be credentialed with the payer in order to bill

### **Psychotherapy Codes**

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90832: Psychotherapy, 30 minutes with patient
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90834: Psychotherapy, 45 minutes with patient

90837: Psychotherapy, 60 minutes with patient

90845: Psychoanalysis

90846: Family psychotherapy (without the patient present), 50 minutes

90847: Family psychotherapy, 50 minutes

(conjoint psychotherapy) (with patient present)

90849: Multiple-family group psychotherapy

90853: Group psychotherapy (other than of a multiple-family group)

https://www.apaservices.org/practice/reimbursement/health-codes/psychotherapy

### **Incident To**

- Bill therapists services incident to the PCP
- Utilize E/M codes based on time (99212-99215)
- Only covered by straight Medicare right now

### **Substance Use Treatment Codes**

https://aims.uw.edu/wordpress/wp-content/uploads/2023/06/Quick-Guide-CMS-SUD-2022\_0.pdf

Similar to CoCM bundled payments

- No psychiatrist required
- No registry required
- Much higher reimbursement
- Cannot be billed by FQHCs and RHCs
- G2086, G2087, and G2088

#### **Parent & Family Wellness Center**

 A mental health and wellness center with specialized expertise in early family wellness.

 Recognizing the importance of whole person care, we prioritize collaboration with other providers.



We love our leasing model!

#### **Contact information**

Clinical Director Emily Horowitz, LPC, PHM-C, CPP-S emily@parentfamilywellness.com

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# **Questions?**

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#### 1302 Affinity Groups

- Interactive, Peer to Peer Learning: Connect with peers facing similar challenges and exchange invaluable knowledge and experiences.
- Expert Guidance: Benefit from expert-facilitated sessions offering actionable advice and insights into optimizing your practice's operations.
- Resource Sharing: Access and share resources with peers and facilitators, including toolkits, templates, and case studies, to streamline your journey towards integrated care.
- Networking Opportunities: Forge meaningful connections with other care teams to foster collaborations that drive positive change in integrated care delivery.



#### 1302 Affinity Groups

- 1. Processes and Workflows to Support Integrated Care
- 2. Behavioral Health in Pediatrics
- 3. Integrating Primary Care in Behavioral Health Organizations

Please complete this survey to express your interest in joining an Affinity Group: <a href="https://redcap.ucdenver.edu/surveys/?s=DJ97JNACXDW3P3RW">https://redcap.ucdenver.edu/surveys/?s=DJ97JNACXDW3P3RW</a>



Join us on 5/29/2024, 12:00-1:00 for our virtual Affinity Group Kickoff Meeting: <a href="https://ucdenver.zoom.us/j/97279403447">https://ucdenver.zoom.us/j/97279403447</a>



#### **Upcoming Practice Learning Community Events**

#### **Affinity Group Kickoff Meeting**

Facilitator - HealthTeamWorks Thursday, May 29th, 2024, 12pm to 1pm

#### **Onboarding Behavioral Health Professionals**

Speaker – Marisa Kostiuk, PsyD Wednesday, June 12th, 2024, 12pm to 1pm

#### **Trauma-Informed Care in Pediatrics**

Speaker – Lauren Eckheart, PsyD, MA Wednesday, July 17<sup>th</sup>, 2024, 12pm to 1 pm



To subscribe to CHES updates, including all Learning Community opportunities, sign up: https://bit.ly/chessignup



# Scan to complete evaluation



https://practiceinnovationco.co1.qualtrics.com/jfe/form/SV\_9LJ4sOi20vTDDqC





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### THANK YOU!

