



Governor's Office of  
Health Transformation

# Benefit and Service Development Work Group

February 24<sup>th</sup>, 2016



Behavioral Health Redesign

# Agenda

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Welcome and Agenda Overview

*Douglas Day*

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Preliminary Survey Feedback – As of 2/22/2016

*Douglas Day*

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Community Psychiatric Support Treatment (CPST)

*Angie Bergefurd*

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Children's Mental Health Services

*Angie Bergefurd*

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Overview of Rate Workbook Updates

*Douglas Day*

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Governor's Office of  
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***Topic:  
Preliminary Survey Feedback –  
As of 2/22/2016***

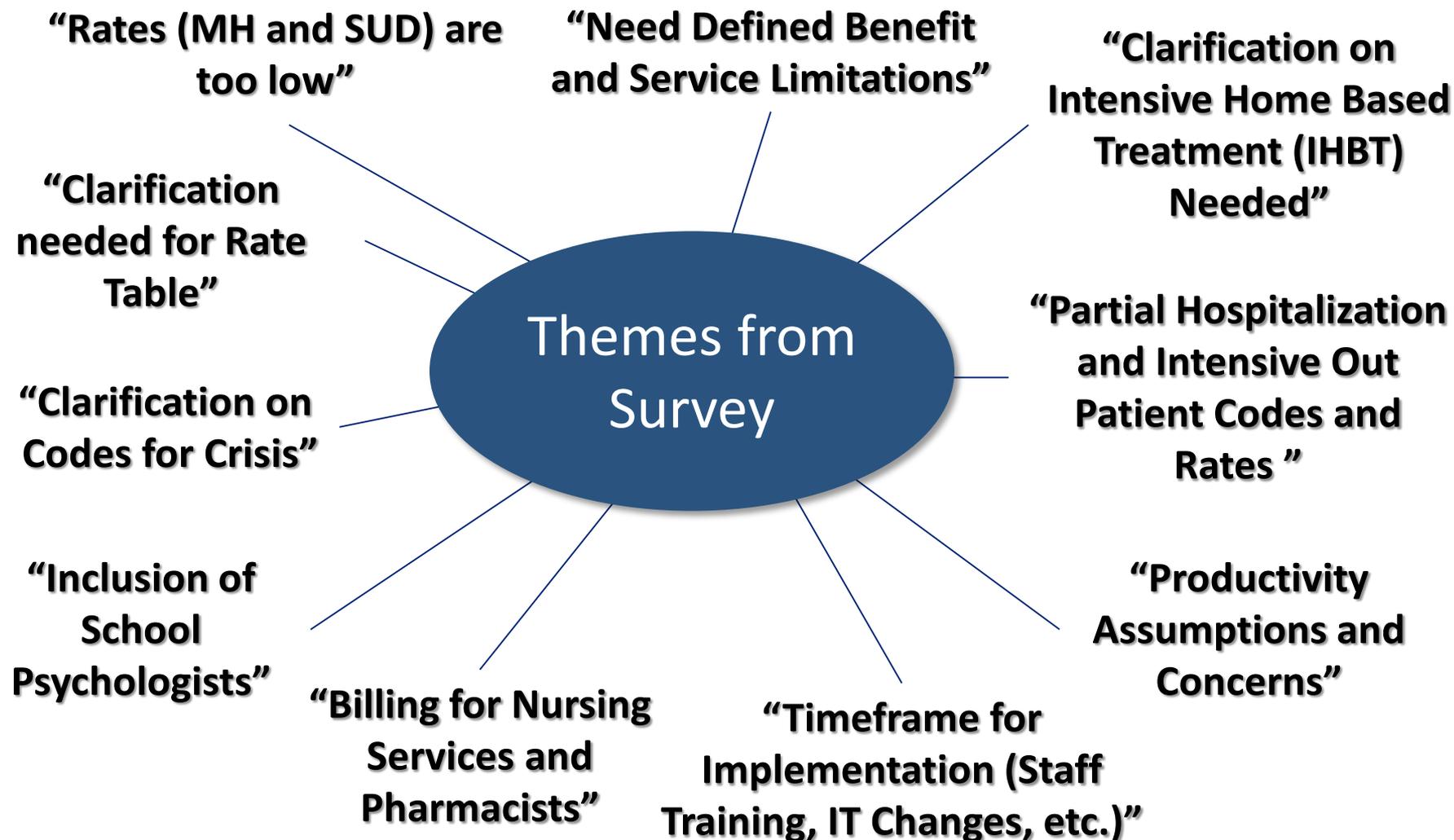
***Survey Will Remain Open Until Close of Business***

***2/26/2016 and Feedback Will Be Re-Analyzed At That Point***



Behavioral Health Redesign

# Key Themes from Survey



Question: Please provide additional feedback on the rates, codes or budget models presented during the February 10th Core Team and Benefit and Service Development Work Group meeting.

# Unlicensed Practitioner Codes - Feedback

The below highlights the most impactful Unlicensed Practitioner codes based on feedback from the group as of 2/22/2016.

Rank	Answer Options	Rating Average	Response Count
1	<b>H0005</b> (SUD – Group)	<b>3.63</b>	<b>16</b>
2	<b>H0001</b> (SUD Assess.)	<b>4.00</b>	<b>17</b>
3	<b>H2017</b> (PSR)	<b>4.75</b>	<b>12</b>
4	<b>H0004</b> (BH Counseling and Therapy)	<b>5.67</b>	<b>18</b>
5	<b>H0006</b> (SUD Case Management)	<b>6.00</b>	<b>13</b>
6	H0048 (SUD Collection and Handling)	6.13	8
7	H0015 (SUD IOP)	6.23	13
8	H2019 (IITS)	7.25	8
9	H2018 (IHBT)	8.20	10
10	H2023 (IPS-SE Initial)	8.57	7

Rank	Answer Options	Rating Average	Response Count
11	H0040 (ACT)	9.13	8
12	H2025 (IPSSE – ongoing)	9.43	7
13	H0038 (Peer Recovery Support)	11.10	15
14	H0010 (SUD Sub Acute Detoxification – Resi. In Patient)	12.00	8
15	H0012 (SUD Sub Acute Detoxification – Resi. Out Patient)	12.00	8
16	H0011 (SUD Acute Detoxification – Resi. In Patient)	12.29	7
17	H0020 (Methadone)	12.43	7
18	H0014 (Ambulatory Detoxification)	12.50	8

Question: Based on the Updated Code and Rate Chart Please rate the following Unlicensed Practitioner (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

# Unlicensed Practitioner Codes Free Text Response

## Rate Concerns

- The rates for H0048, H0005 represents an 80% reduction.
- H0005, H0006, H0001 and H0004 rates are too low
- H0001 - why is this rate lower than H0006? (would require supervision and Dx signoff that would add to actual costs)
- H2017 and H2019 replacing 90863 for RN's and LPN's with a rate cut of more than 50%.
- H0005, H0006, H0015, H0048, H0004 codes are too low and would result in major loss of revenue for agency
- H0001, H0004, H0005, H0015 : rates are to low to sustain current programming
- H0015 - Unbundling the rate seems to be going in the wrong direction and, depending on how the units will be billed, could result in a reduction in reimbursement of almost 90%

## Other Feedback

- There is a concern regarding H2017 and H2019 because degreed/licensed staff are excluded from providing this service
- H0001 – H0038: We are not clear about the impact of the SUD rates because more clarity around the structure of SUD programming is needed
- It is difficult to assess the impact when there isn't clear operational guidance on how to bill
- H0020 can only be provided by RNs, LPN should be included due to workforce issue

The screenshot shows a survey interface with the following sections:

- Behavioral Health Redesign** (Logo)
- Codes and Rates: Stakeholder Feedback Survey**
- Page 1**
- Instruction: "Please use the following rate table to provide feedback: [Click Here for the Updated Code and Rate Chart](#)"
- 1. Based on the Updated Code and Rate Chart (Click on link) Please rate the following Unlicensed Practitioner (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)**
- List of codes with dropdown menus for rating: H0001, H0004, H0005, H0006, H0010, H0011, H0012, H0014.
- 2. Based on the question above, please elaborate on your top five coding and rate concerns (make sure to list the code in the following format: "XXXXX - text here explaining issue or concern")**
- Input fields for concerns: 90211, H0017, H0015.
- 6. Based on the question above, please elaborate on your top five coding and rate concerns (make sure to list the code in the following format: "XXXXX - text here explaining issue or concern")**
- Input field for concerns.
- 7. Based on the Updated Code and Rate Chart (Click on link), please rate the following (RN/Paraprofessionals) (RN/PS) (includes: Peer Supp., CM Spec, High School CMH Spec, Each CMH Spec, Master's CMH Spec) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)**
- Input fields for concerns.
- Instruction: "Please provide additional feedback on the rates, codes or budget models presented during the February 10th Core Team and Benefit and Service Development Work Group meeting."
- Input field for additional feedback.
- Done** button.

# Licensed Practitioner Codes - Feedback

The below chart indicates the most impactful codes based on feedback as of 2/22/2016. The bolded blue text are the top 5 rated codes.

Rank	Answer Options	Rating Average	Response Count
<b>1</b>	<b>90791</b> (Psych. Diagnostic Interview)	<b>3.06</b>	<b>17</b>
<b>2</b>	<b>90837</b> (Psychotherapy – 60 minutes)	<b>3.82</b>	<b>17</b>
<b>3</b>	<b>90792</b> (Psych Diagnostic Interview w/Medical)	<b>4.50</b>	<b>12</b>
<b>4</b>	<b>90834</b> (Psychotherapy 45 minutes)	<b>6.06</b>	<b>16</b>
<b>5</b>	<b>90832</b> (Psychotherapy 30 minutes)	<b>6.25</b>	<b>12</b>
6	90853 (Group)	6.36	11
7	99213 (E&M)	9.45	11
8	99214 (E&M)	10.00	10
9	99201 (E&M)	10.43	7
10	99215 (E&M)	10.45	11
11	90839 (Crisis psychotherapy)	10.50	8

Rank	Answer Options	Rating Average	Response Count
12	90847 (Family Psychotherapy w/patient present)	10.60	10
13	99212 (E&M)	10.67	9
14	99204 (E&M)	10.80	10
15	99205 (E&M)	11.50	10
16	99211 (E&M)	11.67	9
17	99203 (E&M)	11.75	8
18	90846 (Family psychotherapy w/out patient)	11.88	8
19	99202 (E&M)	12.86	7
20	90849 (Multiple family group psychotherapy)	13.86	7
21	90845 (Psychoanalysis)	14.14	7
22	96372 (Therapeutic, prophylactic, or diagnostic injection)	14.17	6

Question: Based on the Updated Code and Rate Chart, please rate the following Licensed Practitioner (Includes: LISW, LIMFT, LPCC/LPCC-S, LICDC, PSY PSY-A/I/T, LPC, LSW, LMFT, LCDC III, LCDC II) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.):

# Licensed Practitioner Codes Free Text Response

## Rate Concerns

- 90837 rate is too low, as it is dependently licensed and independently licensed staff providing service is higher than the rate for Bachelor's providing IITS
- 90832-90839 are too low to be able to support the BH system
- 90791 is higher than 90792 which is a code that MDs are able to bill
- 99212 to 99215 are too low and 90853 will not support group rates
- 90834 rates are too low
- 90849 is too low
- 90846 and 90847 are too low to support BH system

## Other Feedback

- Impact on the workforce due to rates being too low and potential job loss and negative impact on individuals in current BH system
- There is not a rate for RNs and LPNs for Evaluation and Management CPT codes 99201-99205 and 99212-99215.

Behavioral Health Redesign

Codes and Rates: Stakeholder Feedback Survey

Page 1

Please use the following rate table to provide feedback: [Click Here for the Updated Code and Rate Chart](#)

1. Based on the [Updated Code and Rate Chart](#) (Click on link) Please rate the following **Unlicensed Practitioner** (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

H0001

H0004

H0005

H0006

H0010

H0011

H0012

H0014

2. Based on the [Updated Code and Rate Chart](#) (Click on link) Please rate the following **Unlicensed Practitioner** (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

99211

99217

99215

6. Based on the question above, please elaborate on your top five coding and rate concerns (make sure to list the code in the following format: "XXXXX - text here explaining issue or concern")

7. Based on the [Updated Code and Rate Chart](#) (Click on link), please rate the following **Professional** (includes: Peer Supp., CM Spec, High School CMH Spec, Master's CMH Spec) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

Please provide additional feedback on the rates, codes or budget models presented during the February 10th Core Team and Benefit and Service Development Work Group meeting.

Done

# Codes for RN and LPN Activities - Feedback

The below chart indicates the most impactful nursing activity codes based on feedback as of 2/22/2016.



## Feedback for Behavioral Health Codes for RN and LPN Activities



	Code	Rating	Responses
1	99211 (E&M)	1.50	14
2	H2017 (PSR)	1.85	13
3	H2019 (IITS)	2.55	11

Question: Based on the Updated Code and Rate Chart , please rate the following Nursing Code Set (Includes: RN and LPN) in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.):

# Nursing Activity Codes Free Text Response

## Rate Concerns

- 99211 is too low to support the system and specifically complex cases
- H2017 and H2019 are too low/too much of a cut - will cause workforce disruption
- Nursing Services H2017 and H2019: The proposed rates for LPNs and RNs are an improvement from previous models. However, these rates still represent a 38% to 67% cut depending on level of nursing license and location of service. It is likely that our agency would have to reduce these services.
- There is not enough money being invested back in Pharmacological Management and Med Somatic
- Insufficient guidance on how to bill codes specific to nurses

Behavioral Health Redesign

Codes and Rates: Stakeholder Feedback Survey

Page 1

Please use the following rate table to provide feedback: [Click Here for the Updated Code and Rate Chart](#)

1. Based on the [Updated Code and Rate Chart](#) (Click on link) Please rate the following **Unlicensed Practitioner** (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

H0001  
 H0004  
 H0005  
 H0006  
 H0010  
 H0011  
 H0012  
 H0014

2. Based on the [Updated Code and Rate Chart](#) (Click on link) Please rate the following **Professional** (includes: RN, LPN, etc.) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

99211  
 H0017  
 H0019

6. Based on the question above, please elaborate on your top five coding and rate concerns (make sure to list the code in the following format: "XXXXX - text here explaining issue or concern")

7. Based on the [Updated Code and Rate Chart](#) (Click on link), please rate the following **Professional** (includes: Peer Supp., CM Spec, High School OMM Spec, Each OMM Spec, Master's OMM Spec) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

Please provide additional feedback on the rates, codes or budget models presented during the February 10th Core Team and Benefit and Service Development Work Group meeting.

Done

# BH Paraprofessional - Codes

The below chart indicates the most impactful BH Paraprofessional codes based on feedback as of 2/22/2016. The bolded blue text are the top 5 rated codes.

Rank	Answer Options	Rating Average	Response Count
<b>1</b>	<b>H0036</b> (CPST)	<b>2.50</b>	<b>10</b>
<b>2</b>	<b>H0006</b> (SUD Case Management)	<b>2.89</b>	<b>9</b>
<b>3</b>	<b>H2017</b> (PSR)	<b>3.18</b>	<b>11</b>
<b>4</b>	<b>H0040</b> (ACT)	<b>3.25</b>	<b>8</b>

Rank	Answer Options	Rating Average	Response Count
<b>5</b>	<b>H2018</b> (IHBT)	<b>3.60</b>	<b>10</b>
6	H2019 (IITS)	3.83	6
17	H0038 (Peer Recovery Support)	5.16	12

Question: Based on the Updated Code and Rate Chart (Click on link), please rate the following BH Paraprofessionals (Includes: RN and LPN) in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.):

# BH Paraprofessionals Free Text Response

## Rate Concerns

- The rates are too low for H0005, H0006, H0001 and H0004
- H0038 is too low
- \*ACT Rates are too low as the patients that receive care cost more than the 1400 dollars a month that would be received

## Other Feedback

- Concern that licensed practitioners are not able to provide certain services
- Hard to assess how rates will impact revenue without additional billing guidance
- Concern about overall timing and effort required
- Confusion about billing guidance around CPST
- Concern that current budget model is built around the rendering providers' credential/education rather than a patient-centered continuum of accessible, medically necessary services

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Codes and Rates: Stakeholder Feedback Survey

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H0001

H0004

H0005

H0006

H0010

H0011

H0012

H0014

2. Based on the [Updated Code and Rate Chart](#) (Click on link) Please rate the following **Unlicensed Practitioner** (includes: SW-A/T, MFT-T, CDC-A, C-T) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

99211

99217

99219

6. Based on the question above, please elaborate on your top five coding and rate concerns (make sure to list the code in the following format: "XXXXX - text here explaining issue or concern")

7. Based on the [Updated Code and Rate Chart](#) (Click on link), please rate the following **Behavioral Health Paraprofessionals (BH/PS)** (includes: Peer Supp., CM Spec, High School OMM Spec, Each OMM Spec, Master's OMM Spec) codes in terms of how impactful each will be from a financial, operational and clinical perspective (1 being the most impactful, 2 being second most impactful, etc.)

Please provide additional feedback on the rates, codes or budget models presented during the February 10th Core Team and Benefit and Service Development Work Group meeting.

Done

# ACT 'Small Team' Monthly Billing Summary

ACT w/ MDDO:  
Code - H0040

Unit Rates

ACT w/APRN:  
Code - H0040

MDDO 	<b>\$662.60</b>	<b>\$383.75</b>	APRN 
Masters 	<b>\$282.80</b>		Masters 
Bachelors 	<b>\$221.41</b>		Bachelors 
Bachelors 	<b>\$221.41</b>		Bachelors 
Peer Recovery Supporter 	<b>\$178.50</b>		Peer Recovery Supporter 
<b>Total: <u>\$1566.72</u></b>			<b>Total: <u>\$1287.87</u></b>

Under TMACT, 5<sup>th</sup> unit of bachelors can be billed for Supported Employment



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***Topic:***  
**Community Psychiatric Support  
Treatment (CPST)**



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# PSR and IITS - Clarification

The below graphic explains the clarifications provided for both Psychosocial Rehabilitation as well as Intensive Individual Treatment Service to accommodate stakeholder concerns

## Psychosocial Rehabilitation

- Revising to include practitioners with associates degrees
- Revising PSR description to include how practitioners can work with parents, care givers, other professionals
- Expanding the examples to include kids functioning within the family, the school and social programs.



## Intensive Individual Treatment Service

- Revising to include language that clearly articulates 'authority' of services provided by RNs.

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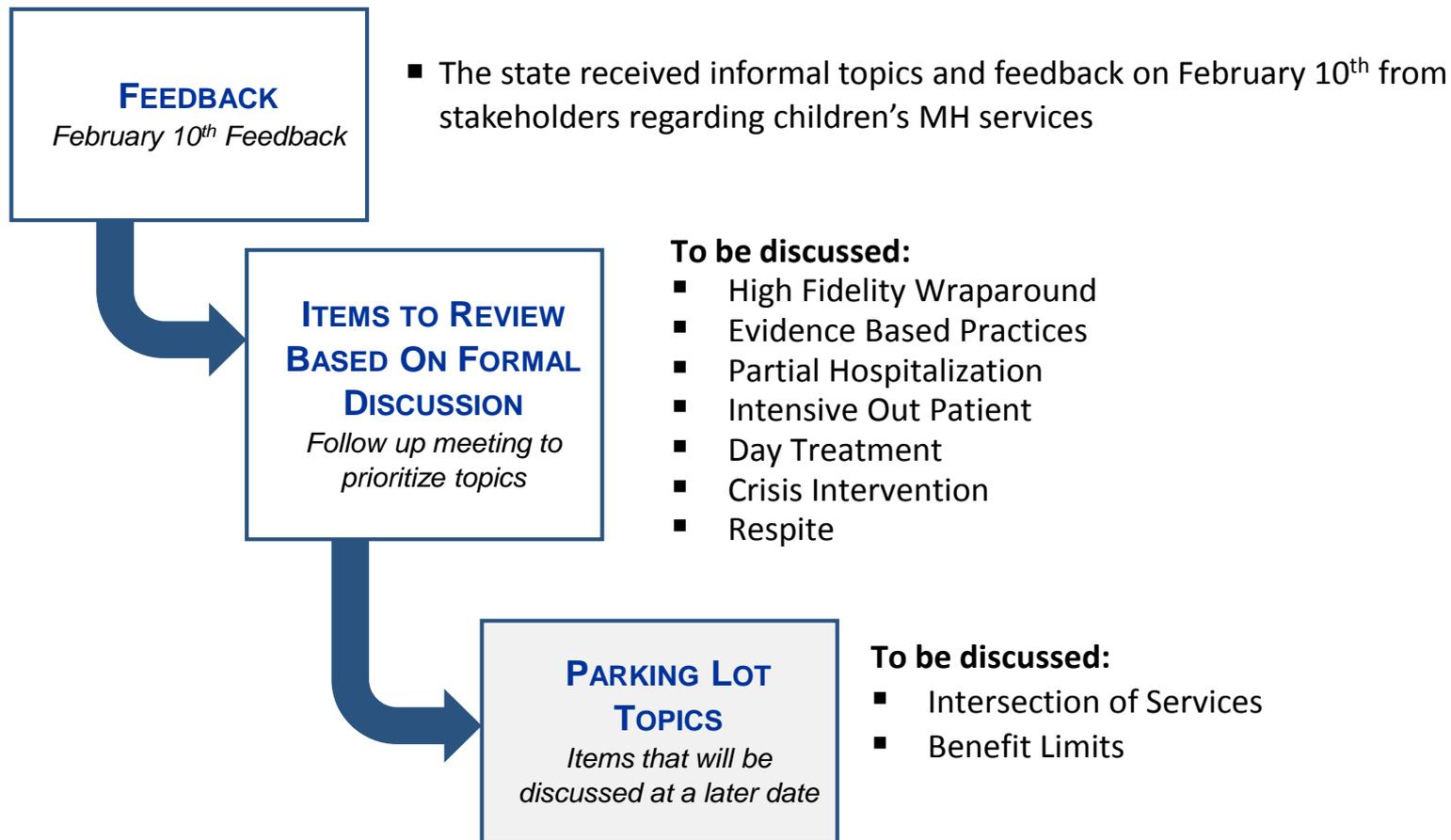
***Topic:***  
**Children's Mental Health Services**



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# Children's MH Follow Up Topics

The below graphic explains the process in which the state will continue to solicit feedback and prioritize stakeholder concerns around children's MH services



**Next Meeting:** Feb 24th (1PM) Topics – Respite, and Early Intervention and Psychological Testing



# Early Periodic Screening, Diagnosis and Treatment (EPSDT) - Healthchek

## OAC 5160-1-01

Healthchek is Ohio's EPSDT program. It is a federally required service package that must be available to Ohio Medicaid enrollees under the age of 21.



## Purpose of EPSDT

The purpose of EPSDT is to discover and treat health problems early. If a potential health problem is found, further diagnosis and treatment are covered by Medicaid.

Ohio is committed to providing the full array of mandatory EPSDT services to Medicaid eligible children under the age of 21 as required by federal law.



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***Topic:  
Overview of Rate  
Workbook Updates***



Behavioral Health Redesign

# Changes Made to Rate Workbook

The below text explains the updates that were made to the overall rate workbook based on corrections identified from the February 10<sup>th</sup> Core Team meeting



Formatting changes have been made to make the chart more legible and easier to use productively. Added "Unit of Measure" column.



Clarified PSR (H2017), IITS (H2019), SUD Case Management (H0006), ISP-SE (H2023), and CPST (H0036) to reflect that when higher level practitioners are performing those services, they will be paid at the rate established for the minimum necessary practitioner.



J codes were moved to the lab/vaccine code tab that was added.



ACT RN and LPN Rates were updated to reflect Master's level.



Corrected H0004 and H0005 rates.



IHBT updates



