



Dear Physicians and Non-Physician Practitioners,

The Centers for Medicare & Medicaid Services (CMS) wants to let you know about 3 behavioral health services Medicare will pay for that may improve outcomes for your Medicare patients:

1. Behavioral Health Integration (BHI) Services
2. Psychotherapy for Crisis
3. Opioid Use Disorder (OUD) Screening & Treatment

### **Behavioral Health Integration Services**

BHI is a model of care that incorporates behavioral health care into other care, like primary care, to improve mental, behavioral, or psychiatric health for many patients. In addition to payment for evaluation and management services, Medicare covers 2 types of BHI services:

1. Psychiatric Collaborative Care Model (CoCM): To bill, use CPT codes 99492–99494 and HCPCS code G2214. A team of 3 individuals delivers CoCM: a behavioral health care manager, psychiatric consultant, and treating (billing) practitioner. This model enhances primary care by adding 2 key services to the primary care team:
  1. Care management support for patients getting behavioral health treatment
  2. Regular psychiatric inter-specialty consultation
2. General BHI services using models of care other than CoCM: To bill, use CPT code 99484 and HCPCS code G0323 to account for monthly care integration. General BHI includes service elements like:
  - Systemic assessment and monitoring
  - Care plan revision for patients whose condition isn't improving adequately
  - Continuous relationship with an appointed care team member

We make separate payment for services you supply over a calendar month service period. Beginning in CY 2023, general BHI services can also be furnished by clinical psychologists or clinical social workers whose services are limited to the diagnosis and treatment of mental illness.

Your patients may be eligible for BHI services. Eligible conditions include:

- Mental health
- Behavioral health, including substance use disorder (SUD)
- Psychiatric

These BHI services may be particularly helpful for patients who aren't improving under other models of care.

Read the booklet (<https://www.cms.gov/files/document/mln909432-behavioral-health-integration-services.pdf>) to learn more.

### **Psychotherapy for Crisis**

Psychotherapy for crisis services are appropriate for patients in high distress with life-threatening, complex problems that require immediate attention. These services can help reduce a patient's mental health crisis (including SUD) through:

- Urgent assessment and history of a crisis state
- Mental status exam

- Disposition (or what happens next for the patient)

Physicians and non-physician practitioners whose scope of covered Medicare services includes the diagnosis and treatment of mental illnesses can offer these services. This includes clinical psychologists, clinical social workers, clinical nurse specialists, nurse practitioners, physician assistants, and certified nurse midwives. Medicare pays for these services under the Physician Fee Schedule.

Visit and bookmark <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/psychotherapy-crisis> for the most recent information including increased payment for Psychotherapy for crisis equal to 150% of the fee schedule amount for services furnished in non-facility sites of service, other than a physician or practitioner's office, effective January 1, 2024, as provided in the Consolidated Appropriations Act, 2023.

## **Opioid Use Disorder Screening & Treatment**

Medicare pays OUD screenings performed by physicians and non-physician practitioners.

- Screening for OUD is a required element of Medicare's Initial Preventive Physical Exam and Annual Wellness Visit.
- During visits in physicians' offices and outpatient hospital settings, Medicare will pay for Screening, Brief Intervention, & Referral to Treatment (SBIRT) treatment services. This is an evidence-based, early intervention approach for people with non-dependent substance use before they need more specialized treatment. Depending on the duration of the service, you may bill G2011 (5-14 minutes), G0396 (15-30 minutes), or G0397 (greater than 30 minutes).

If you diagnose your patient with OUD, Medicare pays for certain treatment services, including:

- Evaluation & Management (E/M) visits for medication management
  - CPT codes 99202-99499 represent visits and services that involve evaluating and managing patient health. You can use E/M visits to provide medication management to make sure patients take medications (like buprenorphine) properly as part of their recovery process.
- Office-based SUD treatment services
  - Office-based SUD treatment services, HCPCS codes G2086-G2088, are a way for you to bill for a group of services for the treatment of SUDs in the office setting. Medicare pays for a monthly bundle of services (for patients who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other SUDs.
- Opioid Treatment Program (OTP)
  - OTPs provide medications for opioid use disorder (MOUD), including methadone, buprenorphine, and naltrexone, as well as a range of other services including individual and group therapy, substance use counseling, and toxicology testing, for patients diagnosed with OUD. Consider referring your patient to an OTP if this specific MOUD is helpful to their recovery.

Learn more about covered OUD screening and treatment options at <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/opioid-use-disorder-screening-treatment>, which includes a list of Medicare-enrolled OTPs.

Thank you for the essential care you provide to your Medicare patients.

DISCLAIMER: For the most current information, see the materials referenced in this letter.