



Mental Health and Co-Occurring Conditions



*A Community Health
Center Perspective*

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Current Reimbursement and Care Priorities

- Transitions of Care - takes many forms in community health setting for both primary care and behavioral health
- Episodes of Care - definition and tracking such as Collaborative Care - depression episodes

Transitions of Care

- *CPT Code 99495* covers communication with the patient or caregiver within two business days of discharge. This can be done by phone, e-mail, or in person. It involves medical decision making of at least moderate complexity and a face-to-face visit within 14 days of discharge. The location of the visit is not specified. The work RVU is 2.11.
- *CPT Code 99496* covers communication with the patient or caregiver within two business days of discharge. This can be done by phone, e-mail, or in person. It involves medical decision making of high complexity and a face-to-face visit within seven days of discharge. The location of the visit is not specified. The work RVU is 3.05.

Transitions of Care

- Affects all areas of “Triple Aim”
- Many integrated settings struggle with transitions
- Review for psychiatric follow ups for both psychiatric admissions and medical
- Apply to other facilities outside of hospitalizations

Episodes

- Depression Care
- Suicide Care
- Ability to define beginning and end of episodes of care with concrete outcomes
- Ability to review total “touches” and “cost”

Questions

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