

#### Changing legislative & regulatory landscape

More Americans Most health plans have coverage than ever before. Billing code revisions

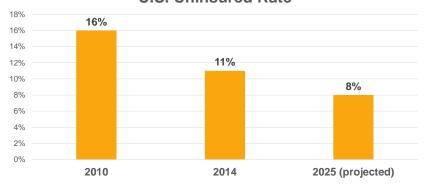
support integrated, coordinated care

and Medicaid must offer MH/SUD benefits at parity.

Performance pay is permeating more payment models.

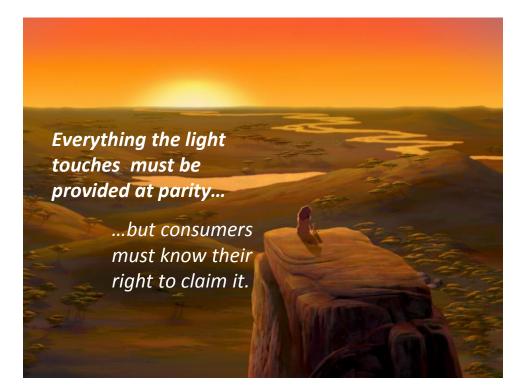


## More Americans gaining coverage (that includes parity)



**U.S. Uninsured Rate** 





#### Opening up current billing codes

States changing billing codes to allow CMHCs to bill for primary care services:

- Indiana
- Tennessee
- Missouri
- Kentucky



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#### New collaborative care CPT codes

- Medicare plans will begin coverage and reimbursement for "Psychiatric Collaborative Care Management Services" starting in 2017
- Based on Collaborative Care Model (CoCM)
- Includes 3 codes to describe services furnished as part of the psychiatric CoCM



#### New care management CPT code

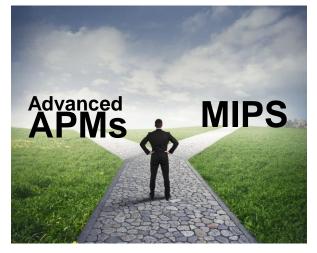
- Medicare Transitional Care Management Services Codes<sup>1,2</sup>
  - Includes services provided to a patient whose medical and/or psychosocial problems require moderate- or high-complexity medical decision making during transitions in care
  - Communication and face-to-face visit within specified time frames post-discharge
  - CPT Codes 99495 and 99496

1. American Medical Association. CPT-Transitional Care Management Services (99495-99496). http://www.sccma-moms.org/Portals/19/assets/docs/TCM-CPT.pdl. Accessed April 14, 2016. 2. American Academy of Family Physicians, Frequently Asked Questions: Transitional Care Management: http://www.astor.



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#### **MACRA's Choice**

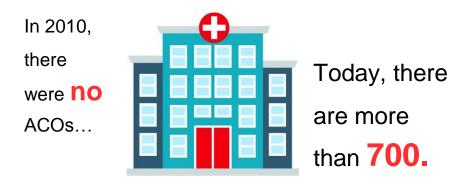




# Shifting risk & accountability to providers



# Moving from episodic "sick care" to population health management





#### **CMS transformation initiatives: DSRIP**

Delivery System Reform Incentive Payment Program

- Part of broader Section 1115 Waiver programs
- Funds to providers are tied to meeting performance metrics
  - · Process metrics in the early years of the waiver
  - Outcome based metrics in later years
- DSRIP activities focused on integration in New York, Texas



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#### **CMS transformation initiatives: SIM**

State Innovation Models Initiative

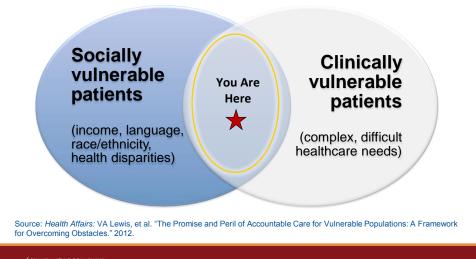
Supports the development and testing of state-led, multipayer payment and delivery models to improve performance/quality and decrease costs

Integration-focused SIM activities in:

 Colorado, Iowa, Maine, Massachusetts, Minnesota, New York, Oregon, Rhode Island, Tennessee



## Our niche: caring for complex, costly patients





HRSA

SAMHSA

- Transparent organization
- Reliability and reputation
- Using patient-specific data to examine progress or lack of progress
- Using registries and monitoring to benchmark staff variance in clinical practice standards



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#### **Infrastructure Needs**

- · Contracting expertise and willingness to experiment
- Value-driven decision-making (outcomes + costs)
- Sophisticated compliance program
- EHRs with registries, HIEs
- · Committed and valued workforce
- Smart, fearless, team-based leadership



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#### It Passed!

The largest federal investment in mental health and addiction treatment in a generation.

Excellence in

**Mental Health** 

Act

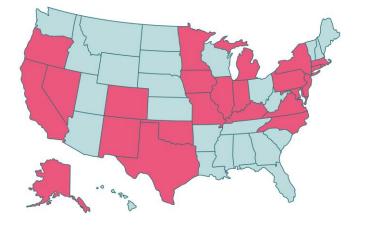


Senators Roy Blunt and Debbie Stabenow



Representatives Leonard Lance and Doris Matsui





#### 24 states are planning their participation



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### What makes CCBHCs so different?



- New provider type in Medicaid
- Distinct service delivery model: trauma-informed recovery outside the traditional four walls
- New prospective payment system (PPS) methodology
- Care coordination and service delivery requirements necessitate new relationships with partner entities



