

Coding Minutes
Public Act 101-0461 Working Group
Development of a Coding Solution

Locations:
CALL-IN ONLY

Call-in Information
Phone Number: 1-312-535-8110
Access Code: 133 366 6471

Welcome

Kate Morthland welcomed members and guests to the first Coding Working Group meeting.

Morthland went over some guidelines as we move forward on this technological platform:

1. I will go over the roll for members when the meeting starts. There is no need to announce yourself when you jump on the phone. I will make sure to run the roll for members and open the lineup for guests to announce themselves.
2. When you are not speaking, please mute your phone. This will ensure that we do not receive any unwanted background noises or feedback.
3. Because we are on a call and I cannot see you speaking, please state your name before speaking so I may take precise notes.

Introductions

Members Present:
Aaron Winters
Daniel Klopfenstein
Heather ODonnell
Patrick Phelan

Guests:
Health Alliance
HCSC
United Health
Illinois Life and Health Insurance Council
Centerstone
Thresholds
Celtic

Overview of Working Group Responsibility

Morthland gave an overview of the Working Group's Responsibilities.

Youth Serious Mental Illness Bundled Treatment Model Coding Solution Workgroup

Deadlines:

1. June 30, 2020: deadline for Department to convene the workgroup under 215 ILCS 5/356z.33 (PA 101-0461)
2. January 1, 2021: issue, delivery, amendment, or renewal date of first health plans required to use the coding solution.

Requirements:

1. Convene a workgroup that includes:
 - a. Illinois insurance companies that deliver bundled treatment
 - b. Illinois mental health treatment providers
2. Workgroup shall determine a coding solution that allows for these bundled treatment models to be coded and paid for as a bundle of services, similar to intensive outpatient treatment where multiple services are covered under one billing code or a bundled set of billing codes.
3. The coding solution shall ensure that services delivered using coordinated specialty care for first episode psychosis treatment, ACT, or CST are provided and billed as a bundled service, rather than for each individual service provided by a treatment team member, which would deconstruct the evidence-based practice.
4. The coding solution shall be reached prior to coverage, which shall begin for plans renewed, amended, issued after December 31, 2020, to ensure coverage of the treatment team approaches.

Discussion on Coding

Morthland introduced Heather O'Donnell to introduce this topic and provide some materials that will assist with the objective. Morthland mentioned that the materials are posted publicly online on the Department of Insurance website.

- Heather introduced the topic to the Working Group. Heather mentioned that there some practical issues that need to be addressed, such as coding. The treatment models referenced do not have a billing code for these 10 different models. This code is for providers so they can bill with one code instead of many. There is a lot of national

reports and work done on this topic. The report attached reports on the various treatment models as well as codes that would make sense for this objective. Heather introduces Mark Fagan from Thresholds to introduce the materials.

- Mark Fagan introduced the Meadows Report and explained that the report is geared toward specialty care, but the Group should think about all three services. Mark explained that the coordinated specialty model is nationally regarded. Our medical necessity work outlined in another Working Group assisted with this process. Mark explained that these services are very individualized; and many families will not take most of these services. The service structure is highly dependent on the family/young person. These coordinated care services are also providing telehealth right now.
- Mark also explained that these service models are provided by a multitude of physicians. Some physicians have support/case management structure and are not licensed like a physician. Because of this, there are issues on how this is billed for commercial insurance. For commercial insurance, this is an issue because some staff are mostly case management.
- Morthland asked about a portion of the report referencing fee for service providers. Mark stated that these providers refer to a Medicaid landscape. Morthland then asked how the structure of creating/developing a code is different in commercial/Medicaid landscapes.
- Health Alliance mentioned that the creation of a data takes national data and evaluations by coding groups. Health Alliance was unsure that this organic coding would be able to happen in this environment.
- Aaron Winters mentioned that there are federal requirements in regard to coding in 45 CFR 162. A health insurer must use medical data code sets and the AMA CPT codes. There are set application processes for those requests.
- Thresholds did mention that Illinois was the first state to pass legislation that would develop a code in a Working Group Setting. Morthland suggested that any other state work around coding of these bundles would be beneficial.
- Aaron Winters asked Thresholds to ask the authors of the Meadows Report if they have talked with Federal CMS on requirements. Aaron requested that if Thresholds does get a hold of the authors, to report back on the information that was attained by the conversation.

- Heather O'Donnell agreed that creating a new code might have hurdles, and asked what the group thought of considering using existing codes. Industry will have a conversation internally and come back to the next meeting with feedback.
- Aaron Winters stated that the IL statute does not include specific job training in the treatment models we are suggesting. Does that deviation impact the code nationally?
- Heather O'Donnell asked if there are collaborative care codes that integrate primary care with psychiatry? Will that help us figure that out? Laura Minzer stated that it would impact commercial insurance.
- Mark Fagan continued his presentation. The meadows foundation is putting forth a new code. The idea around a new code refers to reimbursement of two tracks. These options would simplify the process.
- Laura Minzer mentioned that there was a PA 101-0574, which referred to coding as well. Heather O'Donnell asked Laura Minzer if she could remember what parties were a part of that negotiation. This could help us understand the hurdles they had. Minzer answered that the Illinois Psychiatric Society were big proponents of the bill and might have some insight.
- **Next Steps**

Morthland mentioned that the next meeting will be held on July 15, 2020 from 10:00 AM from 11:00AM. Depending on the pandemic, we might have to hold the next meeting via conference call. We will know locations closer to the date. Regardless if we meet in person, another call-in number will be provided for those that are unable to join in person (if we meet in person.)

The Next Steps of the Working Group are as follows:

- Aaron Winters is going to consider the process of coding in relation with federal laws. Winters will report back at the next meeting.
- Heather O'Donnell is going to reach out to the authors of the Meadows Report and report back at the next meeting.
- Both Heather O'Donnell and Aaron Winters are looking into whether it would be a viable option to use a modifier of a new code cannot be created. Both parties would report back at the next meeting.

Adjourn Meeting adjourned at 10:47 AM

