

**PATIENT-CENTERED
MEDICAL HOME
(PCMH) BEHAVIORAL
HEALTH (BH) SCREENING
AND PERFORMANCE
IMPROVEMENT PROJECT
(PIP) REPORTING**

August 2022



DISCLAIMER

- The following presentation is intended for SoonerCare Choice Patient-Centered Medical Home providers and is current as of August 1, 2022.
- The information does not apply to outpatient behavioral health providers.
- The BH Screening information is a repeat from the May PCMH Redesign webinar. The PIP reporting information is new.

AGENDA

PCMH BH Screening

- Coding for BH Screening
- Best Practices
- Screening Tools
- Screening, Brief Intervention and Referral to Treatment (SBIRT)
- BH Resources and Referrals

PCMH Updates

- PIP Reporting

**CODING FOR
PCMH BH
SCREENING:
96160**

PCMH BH SCREENING CODING

CPT 96160 must be coded to be eligible for the SoonerExcel incentive payment

- Short Description: Patient-Focused Health Risk Assessment
- Long Description: Administration and Interpretation of Patient-Focused Health Risk Assessment

PCMH BH SCREENING CODING, CONT.

Official Guidance

Provider Letter [OHCA 2016-31](#)

Rationale

CPT 96160 was selected as a result of 2017 AMA coding revisions

PCMH BH SCREENING CODING, CONT.

Official Guidance

Provider Letter [OHCA 2022-11](#)

BEST PRACTICES

BEST PRACTICES

Suggested best practices include:

- Member/guardian completes the screening tool in the lobby or exam room
- Nurse scores the screening and has it ready for the provider during the appointment
- Provider reviews results with member and provides brief intervention and referral as appropriate



COMMON CODING ERROR

Most common coding error for BH Screening in a Medical Home include utilization of:

- CPT 96127



COMMON CODING ERROR

CPT 96127

- Short Description: Brief Emotional/Behavioral Assessment
- Long Description: Assessment of Emotional or Behavioral Problems

COMMON CODING ERROR

Paid claims by CPT January - June 2021	
CPT 96127	CPT 96160
29,020	24,847

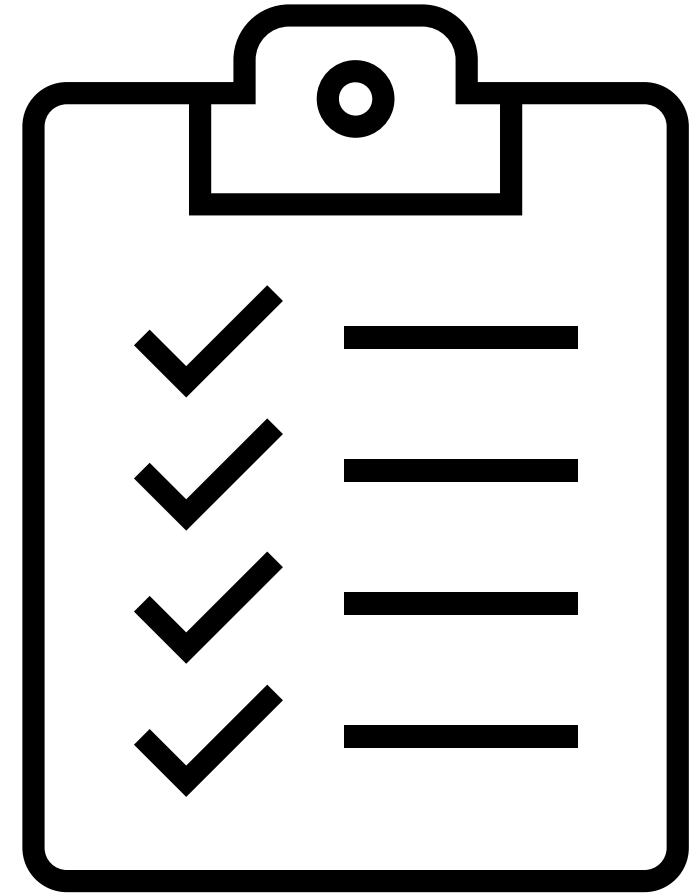
BEST PRACTICES

CPT 96127 & 96160

96127 & 96160 should **not** be coded together when only one screening is performed

Utilization of both 96127 & 96160 on same date of service requires documentation of:

- the need for additional screening
- all screening tools utilized
- results of all screenings



PCMH BH SCREENING TOOLS

Patient-Centered Medical Home Behavioral Health Screening

EPSDT (Early Periodic Screening, Diagnosis, and Treatment) and the Affordable Health Care Act require a behavioral health screening as a best practice of medical care. Part of the responsibilities of SoonerCare Choice medical homes is to conduct behavioral health screenings for members age 5 and older for all tiers.

What is a PCMH?

- [Medical home principles](#)

Resources

- [Billing for PCMH Behavioral Health Screening](#) (January 2022)
- [Billing for PCMH SBIRT Screening, Brief Intervention and Referral to Treatment](#)

- [Pediatric Screener](#) | [Spanish Pediatric Screener](#)

- [Adult Screener](#) | [Spanish Adult Screener](#)

- [List of available screening tools](#) - OHCA has identified validated public domain screening tools that are available to assist physicians and behavioral health professionals with screening and assessing mental health issues. While we have provided this list, it is up to the provider to ensure they are utilizing the most current version. We also make no representation that this list is comprehensive.



BH AND SUBSTANCE ABUSE (SA) SCREENING TOOLS

- SoonerCare Choice Medical Homes have access to free pediatric and adult BH and SA screening tools.
- Tools are provided in English and Spanish and contain scoring and billing guidance.



Pediatric Behavioral Health Screen (Ages 5-16)

Person Completing Form: _____

Relation to Child: _____

INFORMATION FROM YOUR CHILD'S DOCTOR

Emotional and physical health go together in children. Parents are often the first to notice a problem with their child's behavior and/or emotions. You can help your child get the best care possible by answering these questions. Please circle the box that best describes your child. If you do not wish to answer a question, you can leave it blank.

Please circle the answer that best describes your child:

PSC	NEVER	SOME TIMES	OFTEN	Office Use		
				I	A	E
1. Fidgety, unable to sit still	0	1	2			
2. Feels sad, unhappy	0	1	2			
3. Daydreams too much	0	1	2			
4. Refuses to share	0	1	2			
5. Does not understand other people's feelings	0	1	2			
6. Feels hopeless	0	1	2			
7. Has trouble paying attention	0	1	2			
8. Fights with other children	0	1	2			
9. Is down on himself or herself	0	1	2			
10. Blames others for his or her troubles	0	1	2			
11. Seems to be having less fun	0	1	2			
12. Doesn't listen to rules	0	1	2			
13. Acts as if driven by a motor	0	1	2			
14. Teases others	0	1	2			
15. Worries a lot	0	1	2			
16. Takes things that don't belong to him or her	0	1	2			
17. Distracted easily.	0	1	2			

ADDRESS
4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

WEBSITES
oklahoma.gov/ohca
mysoonercare.org

PHONE
Admin: 405-522-7300
Helpline: 800-987-7767

BH AND SA SCREENING TOOLS



The Pediatric BH screening tool utilizes:

- Pediatric Symptom Checklist (PSC)
- Functional impairment assessment
- Conversation starter questions

HOW MUCH DO THE PROBLEMS OR DIFFICULTIES YOU CIRCLED ABOVE INTERFERE WITH YOUR CHILD'S EVERYDAY LIFE?

	Not at all	Only a little	A lot	A great deal
18. Do the difficulties you checked above upset or distress your child?	0	1	2	3
19. Do the difficulties you checked above place a burden on you and your family?	0	1	2	3
20. Do the difficulties you checked above interfere with your child's home life?	0	1	2	3
21. Do the difficulties you checked above interfere with your child's friendships?	0	1	2	3
22. Do the difficulties you checked above interfere with your child's activities?	0	1	2	3
23. Do the difficulties you checked above interfere with school or learning?	0	1	2	3
24. Do you think your child might have a problem with alcohol or drugs?			YES	NO
25. Is your child in counseling or seeing a mental health professional?			YES	NO
26. Does your child have an IEP (Individualized Educational Plan) at school?			YES	NO
27. Are there problems or concerns about your child, yourself or your family that you would like to talk about privately with your doctor?			YES	NO



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BH AND SA SCREENING TOOLS

The Adult BH and SA screening tool utilizes:

- PHQ 2+1
- AUDIT and NM-ASSIST



Adult Behavioral Health Screen

INFORMATION FROM YOUR DOCTOR

Physical and emotional health go together. You can help us provide you with the best health care possible by answering these questions. Please circle the box that best describes you. If you do not wish to answer a question, you can leave it blank.

Your Name: _____

Date: _____

PHQ-2+1 Please circle the answer that best describes you during the past two weeks	Not At All	Several Days	More than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	(0)	(1)	(2)	(3)
2. Feeling down, depressed, or hopeless	(0)	(1)	(2)	(3)
3. Thinking that you would be better off dead or that you want to hurt yourself in some way	(0)	(1)	(2)	(3)

AUDIT, NM-ASSIST Please circle the answer that best describes your use of alcohol or drugs. Drugs include all kinds of street drugs, marijuana, meth, cocaine, or prescription drugs such as tranquilizers or painkillers that are not taken as directed by your doctor.					
1. How often do you drink alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week
	0	1	2	3	4
2. How many drinks of alcohol do you have on a typical day (leave blank if you don't drink alcohol)	1 or 2 drinks a day	3 or 4 drinks a day	5 or 6 drinks a day	7 to 9 drinks a day	10 or more drinks a day
	0	1	2	3	4

BH AND SA SCREENING TOOLS

- Conversation starter question



3. In the past year, did you have 6 or more drinks* of alcohol in one day if you are male; 5 or more if you are female? <i>*One drink means 12 oz. of beer, 1.5 oz. of liquor or 5 oz. of wine</i>	Never 0	Less than monthly 1	Monthly 2	Weekly 3	Daily or almost daily 4
4. In the past 3 months, how often have you used marijuana, other drugs, or nonmedical use of prescription drugs?	Never 0	Less than monthly 2	Monthly 3	Weekly 4	Daily or almost daily 6
5. In the past 3 months, how often have you had a strong desire or urge to use alcohol or drugs?	Never 0	Less than monthly 3	Monthly 4	Weekly 5	Daily or almost daily 6
6. In the past 3 months, has your use of alcohol or drugs led to health, social, legal, or financial problems?	Never 0	Less than monthly 4	Monthly 5	Weekly 6	Daily or almost daily 7
7. In the past 3 months, how often have you failed to do what was normally expected of you because of your use of alcohol or drugs?	Never 0	Less than monthly 5	Monthly 6	Weekly 7	Daily or almost daily 8

Are you currently receiving services from a psychologist, a substance abuse program or counselor, and/or a mental health program or counselor?

(Circle your answer)

YES	NO
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BH AND SA SCREENING TOOLS

Medical Homes may choose to utilize:

- SoonerCare BH Screening tools or
- A developmentally appropriate screening tool from the approved list

Behavioral Health Screening Tools

Health benefit carriers and epidemiologists increasingly recommend the use of screening instruments to identify individuals with undiagnosed disorders, to monitor ongoing symptom severity, and to assess outcomes in clinical practice.

While we have provided a list of other screening tools, it is up to the provider to ensure they are utilizing the most current version. Most of the screeners listed below are free to use however there are a few that are copyrighted and may have costs associated with using them.

We make no representation that the list below is comprehensive.

Screening Tools for Children

Multi-purpose

CANS- Child and Adolescent Needs and Strengths

NICHQ Vanderbilt Assessment Scale- Parent Informant

PEARLS Pediatric ACEs Screening and Related Life-events Screener

PSC 17- Pediatric Symptom Checklist 17

PSC 35- Pediatric Symptom Checklist 35

PSC-Y Pediatric Symptom Checklist-youth

RCADS- Revised Children's Anxiety and Depression Scale

SDQ- Strengths and Difficulties Questionnaire

SoonerCare Pediatric Behavioral Health Screen

SWYC- Survey of Well-being of Young Children

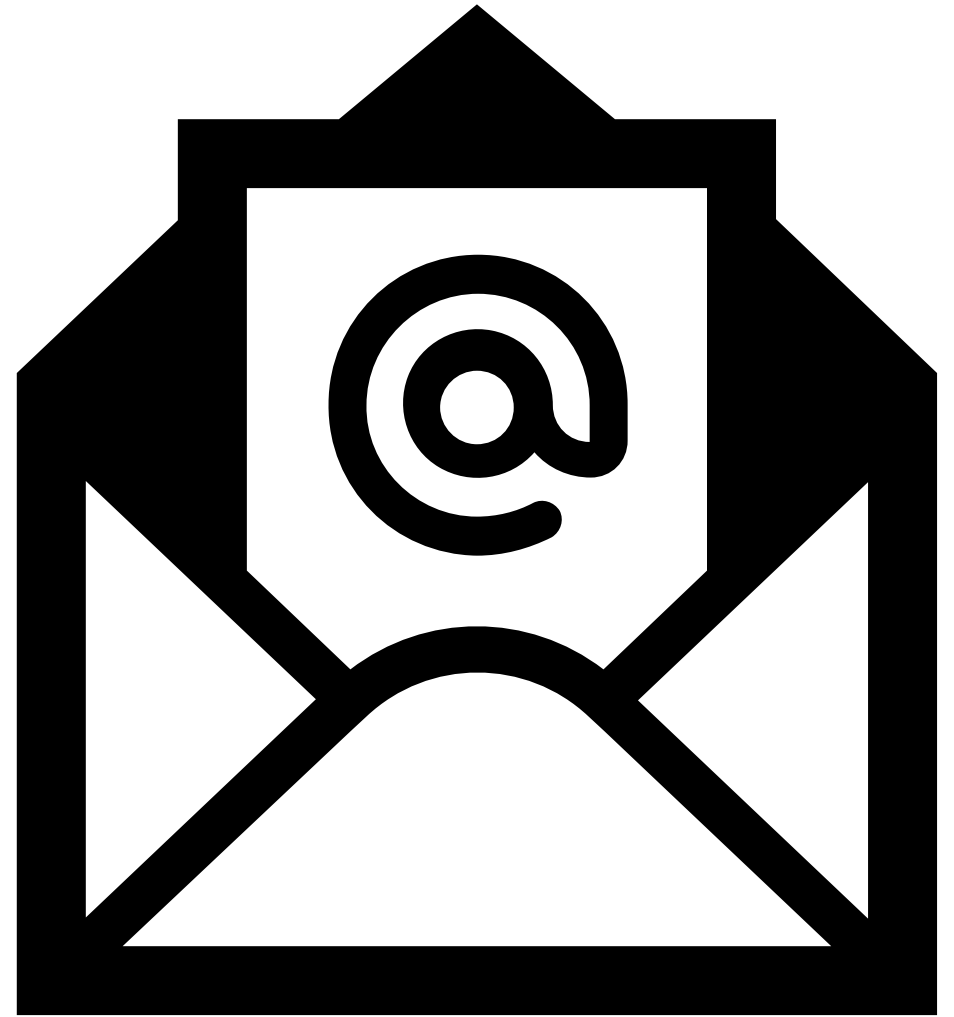
Depression, Mood, and Suicide

ASQ Ask Suicide Screening Questions

CES-DC Center for Epidemiological Studies Depression Scale for Children

LIST OF APPROVED BH SCREENING TOOLS

Providers may request a screening tool be evaluated for inclusion on the approved list by contacting Mary Dimery at Mary.Dimery@okhca.org



**SCREENING
BRIEF
INTERVENTION
AND REFERRAL
TO TREATMENT
(SBIRT)**

SBIRT

Screening Brief Intervention and Referral to Treatment

CPT 99408

- Short Description: AUDIT/DAST 15-30 minutes
- Long Description: Alcohol and/or Substance Abuse Screening and Intervention, 15-30 minutes

SBIRT CODING BEST PRACTICES

Payer	Code	Description
Medicaid	99408	Alcohol and/or substance abuse structured screening and brief intervention; 15 to 30 minutes
Medicare	G0396	Alcohol and/or substance abuse structured screening and brief intervention; 15 to 30 minutes
Medicare	G0397	Alcohol and/or substance abuse structured screening and brief intervention; greater than 30 minutes

SBIRT RESOURCES

Substance Abuse and
Mental Health Services
Administration
(SAMHSA)

➤ <https://www.samhsa.gov/sbirt/about>



Screening, Brief Intervention, and Referral to Treatment
Coding for Reimbursement
Grantees
Resources



Screening, Brief Intervention, and Referral to Treatment (SBIRT)

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders.

Primary care centers, hospital emergency rooms, trauma centers, and other community settings provide opportunities for early intervention with at-risk substance users before more severe consequences occur.

About SBIRT

- Screening quickly assesses the severity of substance use and identifies the appropriate level of treatment.
- Brief intervention focuses on increasing insight and awareness regarding substance use and motivation toward

SBIRT RESOURCES

Oklahoma Department
of Mental Health and
Substance Abuse
Services (ODMHSAS)

- <https://oklahoma.gov/odmhsas/prevention/healthcare/healthcare-based-prevention-resources.html#sbirt>
- [Training Institute \(oklahoma.gov\)](https://oklahoma.gov/training-institute)

Healthcare-Based Prevention Resources

Program Specific Resources

- [Screening, Brief Intervention, and Referral to Treatment](#)
- [Suicide Prevention](#)
- [Pain and Opioid Management](#)

SBIRT Resources

[Screening, Brief Intervention, and Referral to Treatment \(SBIRT\) | SAMHSA](#)

[SAMHSA TAP 33: Systems-Level Implementation of SBIRT](#)

[CDC Planning and Implementing SBI for risky alcohol use: Guide for Primary Care](#)

Screening

Brief Intervention

Referral to Treatment

BRIEF INTERVENTION: Provides feedback about risky behaviors and motivation toward healthy behavior change. It focuses on education and increasing patient insight and awareness about risks related to unhealthy substance use, depression and suicide risk.

At-Risk in Primary Care- The ODMHSAS offers a free, CE-certified online training called At-Risk in Primary Care. It is designed to prepare primary care providers to screen patients for mental health and substance use, perform brief interventions using motivational interviewing techniques, and refer patients to treatment.

PCMH BH RESOURCES

PCMH BH RESOURCES

Psychiatric Consultation Program

- PCPs have access to free, informal telephonic consultation with board-certified psychiatrists
- Advise on psychotropic medication management issues for children, adolescents and adults

How It Works

- SoonerCare PCP contacts OHCA BH unit at 405-522-7597 to schedule a time to review the case
- Appointments are scheduled with an OHCA psychiatrist during business hours

PCMH BH SCREENING WEBPAGE

Resources

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- [List of available screening tools](#) – OHCA has identified validated public domain screening tools that are available to assist physicians and behavioral health professional with screening and assessing mental health issues. While we have provided this list, it is up to the provider to ensure they are utilizing the most current version. We also make no representation that this list is comprehensive.
- [Psychiatric Consultation Program](#)
- [Community Resources to Support the Medical Home Concept](#)
- [SoonerCare Choice Provider Page](#)
- Provider Letters: [2013-41](#) | [2016-31](#)

PCMH BH REFERRALS

Outpatient BH services are self-referred

- [OAC 317:2-7-2 \(c\)](#)
- [Member Handbook](#) page 17



PCMH BH REFERRAL RESOURCES


For assistance locating a contracted BH provider:

- **SoonerCare:** Behavioral Health Helpline 800-652-2010
<https://apps.okhca.org:456/OHCAProviderDirectory/>
- **Oklahoma Department of Mental Health and Substance Abuse Services:** Oklahoma Network of Care
<https://oklahoma.networkofcare.org/mh/index.aspx>

PCMH BH CRISIS RESOURCES

- [ODMHSAS Comprehensive Crisis Response](#) webpage
- Urgent Care and Crisis Centers



Overview 

ODMHSAS is building a comprehensive crisis response continuum to **enhance services** Oklahomans receive when **experiencing a psychiatric emergency** with the goal of providing immediate access at the lowest level of care.

OKLAHOMA's
Comprehensive
Crisis Response 

PCMH BH CRISIS RESOURCES

- Calling 988
 - Launched July 2022
 - <https://988oklahoma.com>
- Mobile Crisis Teams
- Community Mental Health Centers



**PERFORMANCE
IMPROVEMENT
PROJECT (PIP)
REPORTING**

OPTIMAL LEVEL PROVIDERS THAT ELECT TO PARTICIPATE IN A PIP SHALL:

- Submit a detailed report describing the PIP and projected outcomes using the Agency for Healthcare Research and Quality (AHRQ) Plan, Do, Study, Act (PDSA) format in the link provided below:

<https://www.ahrq.gov/sites/default/files/wysiwyg/evidencenow/tools-and-materials/pdsa-form.pdf>

- Additional information and instructions may be accessed in the link below:

<https://www.ahrq.gov/health-literacy/improve/precautions/tool2b.html>

OPTIMAL LEVEL PROVIDERS THAT ELECT TO PARTICIPATE IN A PIP SHALL:

- Submit initial PIP to the PCMH Facilitator by January 15, 2023
- Submit quarterly reports to the PCMH Facilitator by the 15th of the month following the end of the calendar year quarter:
 - April 15th
 - July 15th
 - October 15th
 - January 15th

OPTIMAL LEVEL PROVIDERS THAT ELECT TO PARTICIPATE IN A PIP SHALL:

- Notify the PCMH Facilitator of PIPs that have ended within 10 days of the end of a project;
- Submit a final report regarding PIP outcomes within 30 days of the end of the project;
- Begin a new PIP within 30 days of the completion of a previous project.

PIP REPORTING TEMPLATE

<https://oklahoma.gov/ohca/providers/types/soonerchoice/soonerchoice-choice/medical-home-resources.html>

Oklahoma Health Care Authority > Providers > Types > Soonerchoice > Soonerchoice Choice > Medical Home Resources

Medical Home Resources

Below are a variety of tools and resources to help you build your medical home. We encourage you to utilize these tools to best meet the needs of your practice.

- Medical Home Agreement - [English](#) | [Spanish](#)
- [Child/Adolescent Preventive Performance and Tracking Audit Guidelines](#)
- [AAP Bright Futures Tool and Resources Kit](#)
- [Adult Preventive Performance and Tracking Audit Guidelines](#)
- [US Preventive Task Force Guidelines](#)
- [Behavioral Health and Substance Abuse Screening Tools](#)
- [Compliance Tool](#)
- [Performance Improvement Project \(PIP\) Reporting: Plan-Do-Study Act \(PDSA\) Form](#)
 - [PIP Reporting, PSDA Form Instructions](#)

PCMH FACILITATOR

Please send all PIP reporting documentation to the PCMH Facilitator by email to:

Ladawn.Fulgenzi@okhca.org



OKLAHOMA
Health Care Authority

GET IN TOUCH

SoonerCareEducation@okhca.org
medhomecomments@okhca.org

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

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