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Integrated Behavioral Health Services in a Primary Care Setting: A Role for Private Practitioners

On January 1, 2017, the Centers for Medicare and Medicaid Services (CMS) implemented the Psychiatric Collaborative Care Model (CoCM) which integrates behavioral health care services within primary care services. The CoCM is similar to the University of Washington's Advancing Integrated Mental Health Solutions (AIMS) Center which developed in 2007 a mental health integration program that has proven very successful in addressing mental health issues in an integrated care setting. The CoCM is available for use by Medicare primary care providers and providers of other insurance companies. It has proven to improve patient outcomes, save money, and decrease mental health stigma. It is also a leading example of an alternative payment model (APM) that is changing the way in which providers are being reimbursed.

The CoCM treats common behavioral health problems such as depression, anxiety, alcohol or substance use that require regular follow-up due to their enduring nature. A verbal or written consent must be obtained from the patient in order to provide the CoCM services and documented in the patient's clinical record. The consent should include permission to consult with consulting specialists and inform the patient that cost sharing may apply to face-to-face and non-face-to-face services.

The CoCM Team

The CoCM includes a team with a primary care physician, a psychiatric consultant, and a behavioral health care manager.

- The **primary care physician** is responsible for identifying patients requiring behavioral health services and for their overall treatment. The primary care provider may be of any physician specialty or a nurse practitioner or physician assistant and seeks direct reimbursement for the patient's medical and behavioral health services which are bundled. The primary care physician provides general supervision to the behavioral health care manager and

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oversees the patient's medical, mental health, and behavioral health needs.

- The **psychiatric consultant** is a medical professional trained in psychiatry and advises and makes recommendations for psychiatric diagnoses and treatment. The consultant may not see the patient nor prescribe medications but may make referrals as needed and works closely with the behavioral health care manager.
- The **behavioral health care manager** has formal education or specialized training in behavioral health which may include a social worker, psychologist or nurse. The manager provides care management services, as well as an assessment of needs, including the administration of validated rating scales, behavioral health care planning, brief interventions, and maintenance of a registry. The behavioral health care manager has a collaborative relationship with the team and engages the patient in counseling sessions focused on their mental and behavioral needs. The consultation with the psychiatrist may be face-to-face or non-face-to-face. The behavioral health care manager may or may not meet the requirements to be credentialed as a Medicare provider. Thus, the behavioral health care manager does not bill independently for their services and is subject to "incident to" billing.

The psychiatric collaborative care team meets regularly. During the patient's office visit, the primary care physician identifies those patients who may benefit from behavioral health services and refers them to the behavioral health care manager who conducts an assessment and initiates individualized behavioral health services as needed.

Primary care services are enhanced by care management support for patients receiving behavioral health treatment within the primary care office. The CoCM provides patients with the convenience of one location to receive their physical health, mental health, and behavioral health services.

Role for Private Practitioners

Primary care offices are seeking social workers to serve in the position of behavioral health care manager. Some are contracting out for these services while others are hiring social workers as staff. In situations where the patient may require psychotherapy services and the behavioral health care manager does not have the training to perform the services, the CoCM may refer the beneficiary to a clinical social worker in private practice or other mental health provider in the community. In such situations, the clinical social worker, for example, becomes the primary mental health provider and submits a claim for reimbursement directly to the beneficiary's insurance company. Expanding marketing efforts to primary care settings integrating behavioral health care into their practice is an additional way for private practitioners to market their services and obtain referrals.

Additional information may be obtained from **Medicare Learning Network Fact Sheet, Behavioral Health Integration Services**. Available at www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/Downloads/Behavioral-Health-Integration-Fact-Sheet.pdf.



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