

**Agenda**

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

August 19, 2020  
2:00 PM- 3:00 PM

**Locations:**

CALL-IN ONLY

**Call-in Information**

Phone Number: 1-312-535-8110

Access Code: 133 488 2341

- I. Welcome
- II. Introductions
- III. Minutes
- IV. Discussion of Possible Solutions
- V. Next Steps
- VI. Adjourn

## **Minutes**

Public Act 101-0461 Working Group  
Development of a Coding Solution  
July 15, 2020  
10:00 AM- 11:00AM

**Locations:**  
CALL-IN ONLY

**Call-in Information**  
Phone Number: 1-312-535-8110  
Access Code: 133 9062653

### **VII. Welcome**

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

Morthland went over guidelines while moving forward on this technological platform.

### **VIII. Introductions**

Morthland asked members and guests to introduce themselves.

Members in attendance:

Aaron Winters  
Daniel Klopfenstein  
Heather O'Donnell  
Patrick Phelan

Guests in attendance:

Patrick Besler/BCBS  
Marc Fagan/Thresholds  
Health Alliance  
Laura Minzer/Illinois Life and Health Insurance  
Brenda Jackson/Meadows Institute

## **IX. Minutes:**

Morthland referred to the minutes from the past meeting in June attached to the agenda.

Aaron Winters motioned to approve the minutes.

Patrick Phelan seconded to approve the minutes.

There were no objections.

The minutes were approved.

## **X. Discussion on Member's Findings on Coding**

Morthland reminded the members of the next steps established from the previous meeting.

- Aaron Winters is going to research 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 O'Donnell and 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.
- Winters presented findings. Top level background documents were circulated. The creation of a new code is not going to be a timely process for the Working Group's needs. A State specific solution cannot be a solution. A modifier may be utilized. Winters is conducting a multiple carrier deep dive of what that modifier can be. Winters' members were unable to synthesize that information by the time of the meeting. There might be a desire to create a code in the future, but the professional organizations lead that process. Winters suggests that the Working Group focus on finding a modifier.
- O'Donnell introduced Brenda Jackson from the Meadows Institute. Brenda Jackson is a part of a national group to create a code for first episode psychosis, for. H0040 was the code that was suggested. The code was based on a monthly rate or a per diem rate. Meadows Institute wanted to use an existing code that can be used with T1024 in addition to a HK modifier that was AMA approved. Jackson suggested a solution of a monthly PMPM or encounter rate. Jackson with the Meadows Institute is working with a group that is advocating for the TI code. Jackson also recommends for community treatment that the H0040 is used for that purpose.
- O'Donnell asked Jackson if the code was specifically for Medicaid. Jackson mentioned that the code can be used for commercial insurance as well. The

Medicaid codes are not owned by Medicaid agencies. The T11024 code is fine for the commercial space. The Meadows Institute is already looking into advocating the entire country to use this code.

- Winters mentioned that carriers have logistical concerns for companies that do not use Medicaid codes. Jackson assured Winters that the study is assuming that all plans can use a hick pic code, we are assuming that you use more than numerical codes.
- O'Donnell mentioned that the Working Group is trying to digest all of this and get feedback from the plans on what works in practice. O' Donnell asked Jackson if there is there a code the Institute advises against? Jackson mentioned there were several commercial codes that we kicked around that the Institute didn't prefer.
- Winters suggested that the responsibility be on the carriers to find some code that is appropriate and defining what works best for the plans.
- Jackson strongly recommended not to use the same code for multiple based practices. If your using per diem H0040 code and you have a monthly use, use a HK modifier. Because the billing is different, Jackson suggested using different codes for different services. Winters agreed that the Working Group is on the same page with different coding solutions for each service, not a singular code for different services.
- O'Donnell mentioned that it was helpful hearing the high-level breakdown on how the Meadows Institute came to the solution. The plans need to come up with what they think makes sense. Thresholds will reach out to Meadows once they hear back from the carriers on what makes sense.
- Winters commented that one of the challenges on the carrier side is that there are coding experts for each plan for the solution to make sense and be easily implemented. Winters will present to the Group the results of the plan's research.
- Jackson reported that H0037, H2018, H2020, H2016 were all rejected by the Meadows Institute as inappropriate coding for these services. Winters stated that while some plans utilize Medicaid services, some don't. They have different utilization. This is a concern for the carriers. Jackson mentioned that it is possible that one of the Meadows Institute's rejected codes might work for one of those other services tasked to be coded by the Working Group. Patrick Phelan expressed that these codes might look good for CST services.
- Mark Phelan asked Jackson what sort of education and credentialing can bill for these codes. Jackson explained that the Meadows Institute has two slightly different approaches. For AST- the payers work with the teams and credential the entire team. For first episode psychosis, this practice is not as well developed, but credentialing is developing around the nation. For example, NY is a good center of excellence. Jackson hopes to see some national standards and consensus on that as well. You could work with NY to come up with a credentialing team. Phelan commented that Illinois doesn't have the credentialing service for AST and CST.
- Winters mentioned that O'Donnell has been very helpful in obtaining HFS and DHS providers. Carriers finally have the provider lists; however, the carriers do not have contact information from HFS. Winters stated that carriers need to make sure they are fulfilling the contract. O'Donnell is going to work with Winters in obtaining the information.

## **XI. Next Steps**

- The following meeting will be held on Wednesday, August 12, 2020 from 10:00AM-11:00AM. If it is determined at the end of that meeting that the Working Group will need supplemental meetings, I will then reach out to members for additional availability.
- Winters is going to continue looking at plan data to report back to the Working Group at the next meeting with possible codes.
- Heather is going to take Winter's suggested codes and take them back to the Meadows Institute for further interpretation.
- O'Donnell and Morthland thanked Jackson and the Meadows Institute for offering perspective and presenting to the Working group.

## **XII. Adjourn**

- The Meeting adjourned at 10:44 AM