Nicole Owings-Fonner: Welcome to today's webinar series entitled “Getting Reimbursed: Updates on Billing and Documentation for Health Behavior Assessment and Intervention Services in 2020”. Our presenters today are Dr. Stephen Gillaspy, APA’s senior director of health care financing, and Ms. Meghann Dugan-Haas, APA’s coding and payment policy officer. This webinar series has been pre-recorded and broken down into segments to make it easier for you to understand and refer back to. Our objectives are to understand the H&B code set review and revision process, to introduce the 2020 Health Behavior Assessment and Intervention Services, and we'll review the new CPT codes, descriptions and coding structure, as well as provide an explanation of how the existing codes crosswalk to the new codes. We’ll also apply the new codes using clinical examples and review coding guidelines, payment policies, and reimbursement values.

In this next section of the webinar, our presenters will go over the work values for the 2020 Health Behavior Assessment and Intervention Services. Go ahead, Stephen and Meghann.

Dr. Stephen Gillaspy: So, in this table, you're gonna see the CPT codes - our new CPT codes - on the left-hand side. In the second column, you have the code descriptors; in the third column, you're gonna have the work RVUs that were recommended to CMS that came out of the RUC process. The fourth column, you're going to have what you guys may have... have been... have seen some of our updates about CMS proposed rule and the proposed work RVU – that's in the fourth column. And then on the final... the fifth column on the right-hand side at the very end: that is the final rule, the final work RVU that will go into effect in 2020. One thing to note – and again, we've described this as the... the work RVUs – we tried to bring those in line with psychotherapy codes, so again you'll see significant increases in work RVUs across the board. One important thing to note here - and this ties back to previous slides where we talked about the difference in... with the add-on codes - why there is a decrease in in value with add-on codes versus a base code. So, if we take, for example, nine six one five eight (96158) which is the base code for individual intervention, the value for that is 1.45. If you think about - and that's for thirty minutes - if you think about the add-on code, which is in 15 minutes, it has a value of 0.50. If you were to add those together – so, two 15 minutes to get the same base code – you realize there's a discrepancy... discrepancy between the value of the base code of 1.45 and then two add-on codes which would equal 1.0. Again, just to illustrate: the reason why there's a reduction in value for the add-on codes is because that pre- and post-service, that work and the... the RVU has been pulled out of that because for the add-on codes, you're only receiving the RVU for the intraservice. So, I think that's a good example.

So, again what this shows you: it shows you the codes; it shows you the final RVUs for both base codes and add-on codes for this slide, as well as the assessment code. Just a reminder: the 96156, our very first code, which is our assessment/reassessment code – that is an untimed code and again it's more an equivalent to the diagnostic interview on the psych... on the psychotherapy side. So, here you have the value for that; you have the base and add-on code for individual or two intervid... individual intervention codes and then the two codes, the base code and the add-on code or our group services, which are for two or more patients.

So, this next slide - again, it's set up the same way: the CPT code, code descriptor, recommended RVU, proposed, and then the final RVU values. Again, this is for our two family codes; so, this is for 96167, our family intervention with the patient present with... with the final work RVU of 1.55. Again, just as example, if you do the math and you add up the add-on code the nine six one six eight (96168), the equivalent of two add-on codes again is going to be less than the base code because the pre- and the post-service has been... has been pulled out of that. But here you see - and if you think about in relation to 30 minutes of psychotherapy - you will see that our base codes the nine six one six seven (96167) and then nine six one seven oh (96170), those work values are right in line with 30 minutes of psychotherapy.

Nicole Owings-Fonner: In this next section, our presenters will share with you some resources for the 2020 Health Behavior Assessment and Intervention code family.

Meghann Dugan-Haas: Throughout this webinar series, we have reviewed all of the new CPT codes, the code descriptors, the RVU values, as well as the crosswalks for reporting the new HBAI services beginning on January 1, 2020. For your convenience, all of this information has been compiled into their own individual resources and are found on the Reimbursement section of the APA website. That website is above: the first link reported. We strongly encourage...
you to go and visit this site, download these resources, and begin familiarizing yourself - as well as your staff - with the new codes so that you're fully prepared to implement the new code set, come January 1.

**Dr. Stephen Gillaspy:** In addition to the current resources that we have available, we will be producing additional publications, new information and resources to assist you and your staff with making the transition and implementing the new HBAI codes that will go into effect in January. So, specifically one resource that is under development and will be coming your way in the near future: we are developing a health behavior assessment intervention billing and coding guide. This will be similar to the guide that was developed for the psychological testing and neuropsychological testing services; so, we're in the midst of developing that and we'll get that out and available. That will be available to not only members, but we'll also make that available to payers as well. Additionally, after the webinar and as questions start to come in, we will do... we'll have frequently asked questions and/or respond to that as well as additional resources will be forthcoming.

**Nicole Owings-Fonner:** Thank you for viewing our webinar series on the new HBAI family of codes and thank you to our presenters for sharing this important information to help us all prepare for 2020. APA Services, Inc., is available to help members with any health insurance or managed care issues, whether this involves private or government insurers. For issues related to billing codes and Medicare or any questions regarding the content of this webinar series, please contact the Office of Healthcare Finance at OHCF at APA dot org. For issues with Medicaid or private insurers, please contact the Office of Legal and Regulatory Affairs at praclegal at APA dot org. If you are unsure of who to direct your questions to, you can also reach out to the Office of Health Care Finance and they will help direct you to the right person. Thank you and have a great day.