

In This Issue

The last few months have brought exciting policy news for behavioral health in older Americans, as Congress passed the OMNIBUS federal budget and the Consolidated Appropriations Act, 2023 (H.R. 2617) that was signed into law by President Biden on December 29, 2022. This legislation includes funding for all federal agencies through September, 30, 2023 and new programs and policies addressing mental health needs of older Americans. In this month's Hot Topics Newsletter, we will highlight recent policy news impacting mental health and substance use needs for older Americans, with special attention to the Omnibus provisions as well as Centers for Medicare & Medicaid Services (CMS) updates in billing codes that will help us further serve older adults' behavioral health needs. For more information and resources, please check the [E4 Events Calendar](#).



2023 Omnibus Legislation – a few highlights

For additional details, [Joel E. Miller](#) (National Coalition on Mental Health and Aging) provides a thorough overview of these policy investments.

- **Provider Expansion:** Beginning in January, 2024, services provided by mental health counselors (MHCs) and marriage and family therapists (MFTs) will be covered by Medicare Part B, significantly growing the geriatric workforce. There are also provisions for Medicare funded residency positions and HRSA Substance Use Disorder Treatment and Recovery (STAR) loan repayment program.
- **Increased Service Coverage:** The omnibus also expands Medicare access to telehealth, intensive outpatient, crisis psychotherapy, and behavioral health integration services.
- **PEERS Act:** The law authorizes funding in grants to provide peer-supported mental health services, including [virtual support](#). It includes provisions from the [PEERS Act](#) to ensure that peer support specialist services will be covered by Medicare.

Here are some exciting updates in the CMS 2023 Physician Fee Schedule

Relevant updates in the CMS 2023 Physician Fee Schedule. For more specific information about updated CMS billing codes, CMS offers a [Physician Fee Schedule Look-up Tool](#).

- **Behavioral Health Integration (BHI):** The “incident to” regulation now allows behavioral health services to be provided under the general, rather than direct, supervision of a physician or non-physician practitioner, when these services or supplies are furnished by auxiliary personnel, such as licensed professional counselors and licensed marriage and family therapists.
- A [new General BHI code](#) describes a service personally performed by clinical psychologists or clinical social workers to account for monthly care integration where the mental health services furnished by a psychologist or social worker are serving as the focal point of care integration. CMS is finalizing the proposal to allow a psychiatric diagnostic evaluation to serve as the initiating visit for the new general BHI service.
- [Chronic Care Management and Interprofessional Consultation:](#) Healthcare for older adults often requires a team-based approach. New Chronic Care Management codes facilitate this critical aspect of care.

In addition, CMS now includes options for payment of [interprofessional consultation](#), a necessary component of team-based care for older adults.

- **[Opioid Treatment Programs \(OTPs\)](#)**: The CY 2023 Physician Fee Schedule final rule includes revised pricing for the drug component of the methadone weekly bundle and the add-on code for take-home supplies of methadone. Additionally, CMS is changing the payment for the bundle to reflect 45 minutes of psychotherapy, an increase over the current standard of 30 minutes. There are also modifications allowing for certain audio-visual, audio-only, and mobile unit services.

- **[Chronic Pain Management Services](#)**: Chronic pain is prevalent, especially in adults over the age of 65. New CMS codes expand billing for pain management services, including behavioral interventions. Note that mental health providers are to use Health & Behavior codes.

- [Chronic Pain Facts in the Medicare Population](#)
- [Pain Assessments Tools](#)
- [Summary of the new chronic pain codes in the final CY physician fee schedule 2023](#)

Hot Topics Research

As always, we aim to provide a digest of the latest research in older adult behavioral health. This month, we highlight studies that provide support for the recent policy changes and can inform practice as these policy changes and updated CMS codes improve the accessibility and availability of care for older Americans.

[Payment strategies for behavioral health integration in hospital-affiliated and non-hospital-affiliated primary care practices](#)

Ma and colleagues report data on payment strategies used by U.S. primary care practices to fund behavioral health integration. They also compare strategies between practices with and without hospital affiliation.

[Balancing Safety, Comfort, and Fall Risk: An Intervention to Limit Opioid and Benzodiazepine Prescriptions for Geriatric Patients](#)

Bloomer and colleagues report findings that provide support for decreasing opioid and benzodiazepine prescribing in older adults and increasing other pain management strategies, including behavioral interventions.

[Association of injury after prescription opioid initiation with risk for opioid-related adverse events among older Medicare beneficiaries in the United States: A nested case-control study](#)

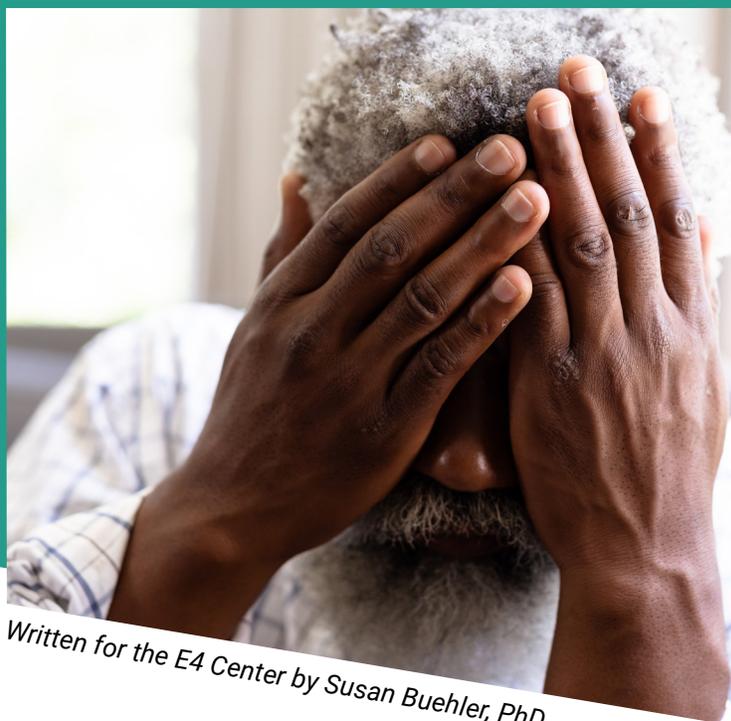
Wei and colleagues examine associations between incident injury after opioid initiation and subsequent risk of opioid-related adverse events in Medicare Beneficiaries.

[Improving the management of chronic pain, opioid use, and opioid use disorder in older adults: study protocol for I-COPE study](#)

Kagarmanova and colleagues describe of work in the pipeline involving implementation and evaluation of I-COPE (Improving Chicago Older Adult Opioid and Pain Management through Patient-centered Clinical Decision Support and Project ECHO®) aimed at serving older adults with chronic pain, opioid use, and opioid use disorder (OUD).

[An Evaluation of an ACT-Based “Aging Resiliently” Group](#)

Goetz and Hirschhorn report findings on a brief intervention delivered in the integrated primary care setting. This study demonstrates innovated ways behavioral health providers may expand care opportunities in behavioral health integration.



Written for the E4 Center by Susan Buehler, PhD

Upcoming Events

You can register for these events or learn more by going to our website at e4center.org/calendar

APRIL

[Considerations for Peer Supporters Working with Older Adults](#)

April 5

@ 12:00 pm - 1:30 pm CDT