

# National Council for Mental Wellbeing Integrated Care Financing Guides

Although not specific to West Virginia Medicaid, many of these documents provide information, tips and tools that support providers with general coding and billing considerations, best practices, and options that apply to other major payers and are frequently applicable at the State Medicaid level.

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- **Decision Support Tool:**
  - Spreadsheet inventory and decision support tool containing billing codes, descriptions, provider qualifications relevant to Behavioral Health Integration, Care Coordination, MOUD, Metabolic Monitoring and Screening.
  - Contains mock revenue calculation case example for MOUD and for BH screening and referral in primary care that can be reused for West Virginia MA specific calculations.
- **Decision Support Tool Primer:** Aims to provide organizations with the opportunity to estimate potential revenue based on specific codes, identify provider disciplines that permitted to bill specific codes and provide additional context salient to the utilization of respective codes.
- **MOUD Billing Module:** Includes Revenue Cycle Management tips and tricks and options for optimizing staff to maximize revenue.
- **Screening Billing Module:** Includes care coordination codes by payer type as well as options for primary care screenings in mental health and substance use treatment settings.
- **Care Coordination and Care Management Module:** Includes payer mix, coding, models, implementation considerations and addresses social determinants of health.
- **Metabolic Monitoring Module:** Includes impetus and definitions, coding strategy and preparing for value-based payment.

