

# Medicare Updates for Peer Support: Principal Illness Navigation and Community Health Integration Codes

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# “Incident to” Billing

- These services are provided using “Incident to” billing; [42 CFR 410.26](#)
  - Designated care management services can be furnished under general supervision of the physician (or other practitioner) when these services or supplies are provided incident to the services of a physician (or other practitioner)
  - Incident to: services provided by auxiliary personnel under the supervision of a physician or qualified health practitioner
  - Auxiliary personnel: any individual who is acting under the general supervision of a physician (or other practitioner) and meets any applicable requirements to provide incident to services, including licensure, imposed by the State in which the services are being furnished.
  - General supervision: service is furnished under the physician’s (or other practitioner’s) overall direction and control, but the physician’s (or other practitioner’s) presence is not required during the performance of the service

## **Community Health Integration (CHI)**

- Unmet needs that are interfering with medical care
- Incident to billing

## **Principal Illness Navigation (PIN)**

- Navigation of a principal illness
- Incident to billing

# Community Health Integration (CHI)

- Addresses unmet social determinants of health needs that significantly limit the practitioner's ability to diagnose or treat the patient
- Describes the use of auxiliary personnel including community health workers to (amongst other things):
  - Provide person-centered planning
  - Health system navigation
  - Coordinate services from health care practitioners, facilities, and from home-and community-based service providers and social service providers
  - Facilitate access to community resources
- Can be used in conjunction with other care management services
- G0019 is 60 min/month, G0022 is for each additional 30 min/month

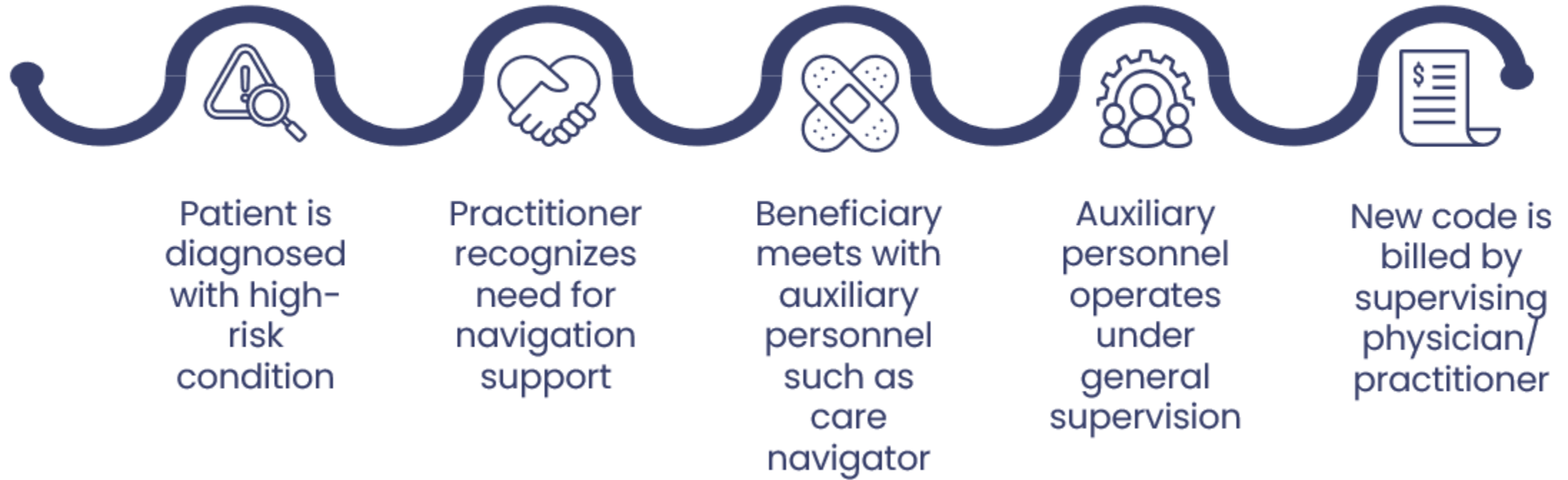
# Principal Illness Navigation (PIN)

- Addresses a serious, high-risk condition, illness, or disease expected to last at least 3 months, that places the patient at high risk of:
  - Hospitalization, nursing home placement
  - Acute exacerbation or decompensation, including functional decline or death
  - Note: includes behavioral health conditions
- Describes the use of auxiliary personnel including patient navigators to:
  - Provide person-centered planning
  - Health system navigation
  - Can also address unmet SDOH needs
- PIN: G0023 60 min/month, G0024 each additional 30 min/month

# PIN-Peer Support (PIN-PS)

- PIN-Peer Support (PIN-PS) are subset of PIN based on peer support competencies, activities are slightly different
  - Changed “Conducting a person-centered assessment...” to “Conducting a person-centered interview...” based on public comments
  - Changed “Communication with practitioners, home-, and community-based services...” to “Assisting the patient in communicating with their practitioners, home-, and community-based services...”
- PIN-PS is limited to treatment of behavioral health conditions that otherwise satisfy the definition of high-risk conditions. Patients with behavioral health conditions can still receive PIN (G0023 and G0024), but patients cannot receive both PIN and PIN-PS for the same serious, high-risk condition
- PIN-PS: G0140 60min/month, G0146 each additional 30 min/month

# PIN in Practice





# Auxiliary Personnel Requirements for CHI/PIN

- “Competencies of patient and family communication, interpersonal and relationship-building, patient and family capacity building, service coordination and systems navigation, patient advocacy, facilitation, individual and community assessment, professionalism and ethical conduct, and the development of an appropriate knowledge base
  - For CHI: including of local community-based resources.”
  - For PIN: including specific certification or training on the serious, high-risk condition/illness/disease addressed in the initiating visit.”
- Neither CHI nor PIN require a certain number of training hours

# Resources

- [CMS FAQs](#)