

Tobacco Use Disorder Treatment Reimbursement

Purpose

Community Behavior Health (CBH) is committed to ensuring that Members with a tobacco use disorder (TUD) receive evidence-based tobacco use disorder treatment. To that end, CBH is issuing Bulletin 22-08 to inform Providers of the opportunity to provide and bill for tobacco cessation services.

Scope

This Bulletin pertains to all outpatient-based (non-hospital/non-residential) mental health and drug and alcohol programs as follows:

- ➔ Mental Health Outpatient Programs
- ➔ Drug and Alcohol Outpatient Programs
- ➔ Mental Health and Drug and Alcohol Outpatient Programs
- ➔ Community Integrated Recovery Centers (CIRC)
- ➔ Mental Health Partial Hospitalization Programs
- ➔ Drug and Alcohol Partial Hospitalization Programs
- ➔ Independent Practitioners – Physicians, Psychologists and Certified Registered Nurse Practitioner (CRNP)

Additional information regarding the level of care is listed below.

<i>Level of Care</i>	<i>CPT Code</i>	<i>CPT Code Description</i>
300 - 227	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes.
350 - 171	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes.
700 - 33	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes.

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Eligibility

To be eligible to provide and bill for tobacco cessation services, outpatient Providers must take the following steps:

1. Complete the Pennsylvania Department of Health (PA DOH) training, “**Every Smoker, Every Time**.” Providers will receive a Certificate of Completion that must be included in their completed Registry application.

2. Complete and submit the **Pre-Approved Tobacco Cessation Registry application** to the PA DOH.

» Providers should check “Yes” when answering the following question:

If your program is approved, would you like to be referred to the Department of Human Services (DHS) for review and approval by Medical Assistance for reimbursement of tobacco cessation services?

3. Enroll with the **Pennsylvania Department of Human Services (PA DHS) Medical Assistance program**.
4. If your agency meets the minimal qualifications stated above and have enrolled in PROMISE for the 370 Specialty Code, please, contact your Provider Relations Representative to request this new Level of Care be added to your Schedule A.