



OREGON
HEALTH
AUTHORITY

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Behavioral Health Workforce Development: Integrated Behavioral Health

Health Aspects of Kindergarten Readiness
Measure: Young Children Receiving Social-Emotional
Issue-Focused Interventions/Treatment Services
CCO Quality Incentive Metric



Agenda

- Presentation by Alex Smith, PsyD and Emily Morgan, PhD (Providence Health & Services)
- Guidance documents
- Upcoming technical assistance opportunities

Workforce development and the quality metric

- The Social-Emotional Interventions for 1-5 quality metric measures the number of CCO members (children ages 1-5) who receive any of the issue-focused interventions/treatment services included in the metric set of 44 CPT codes, which can be found in the [2025 measure specifications](#).
- Ensuring that there are enough providers available with the necessary expertise is critical for CCOs to be able to provide these services.
- Developing the expertise of existing providers and engaging more providers in this work is foundational to this quality metric.

Presenters



Alex Smith, PsyD

Licensed Psychologist,
Pediatric Behavioral Health Provider,
Pediatric Lead
Providence Health & Services



Emily Morgan, PhD

Licensed Psychologist,
Pediatric Behavioral Health Provider
Providence Health & Services

Working with Children 1-5 years and their Families in Primary Care

Alex Smith PsyD and Emily Morgan PhD

Outline

- Integrated Behavior Health
- General Behavioral Health Provider (BHP) Team
- Pediatrics Team
- Facilitators and What Works
- Barriers
- Ideas for CCO

Integrated Behavioral Health: GATHER

- **Generalist** (anxiety, depression, sleep, feeding, ADHD, toileting, behavior management)
- **Accessible** (Warm Hand Offs, curbside consultation)
- **Team-Based** (Interdisciplinary team of behavioral health providers (BHPs), primary care providers (PCPs), medical assistants (MAs), nurses, administrative staff)
- **High Productivity** (Roughly 40 patient slots a week, 30-minute session, about every 2-4 weeks)
- **Education** (Parent training, teaching providers, supervision, trainings and grand rounds)
- **Routine** (Mental health as a regular service provided, destigmatize, increase access)

Our Integrated Behavioral Health Team

- Ideally each clinic has a behavioral health provider on site
- All are licensed psychologists (PsyD and PhD)
- Primary care behavioral health (PCBH) model
 - 1-8 sessions
 - 30-minute appointments
- Refer out as needed
 - Comprehensive evaluations
 - Long-term care
 - Specialty (e.g., endocrinology)

Interactions with physicians

- Frequent consultations among other providers
- Regular attendance to all provider meetings
- Regular presentations/education to physicians on our role
- Scrub physician charts for potential appropriate referrals
- Regular warm hand offs

Sharing Pediatric Expertise with other BHPs

- Pediatric team of behavioral health providers that specialize in pediatrics meets monthly
 - Provide trainings for trainees and other BHPs on various pediatric specific topics
 - Available to consult/mentor other BHPs on pediatric cases that may be complex or unfamiliar to the other provider
 - Available as a referral source for BHPs in other clinics to utilize when there is a pediatric patient that is out of the scope of their ability to practice

Common CPT codes: Psychological

CPT code	Description	Time	Included in the quality metric
90791	Psychiatric diagnostic eval	16+ minutes	Yes
90832	Individual therapy	16-37 minutes	Yes
90834	Individual therapy	38-52 minutes	Yes
90837	Individual therapy	53+ minutes	Yes
90846	Family therapy w/o patient	26+ minutes	Yes
90847	Family therapy	26+ minutes	Yes
90785	Interactive complexity add-on	N/A (cannot be added to family therapy or crisis codes)	No
90839	Crisis emergency	30-74 minutes	No
90840	Crises emergency add-on	Additional 30 minutes	No
96171	Family w/o patient add-on	Additional 15 minutes	Yes

Common CPT codes: Health and behavior assessment and intervention

CPT code	Description	Time	Included in the quality metric
96156	Initial assessment/ Reassessment	N/A	No
96158	Individual	16-30 minutes	Yes
96159	Individual add-on	Additional 15 minutes	Yes
96167	Family	16-30 minutes	Yes
96168	Family add-on	Additional 15 minutes	Yes
96170	Family w/o patient	16-30 minutes	Yes

Unbillable Services

- Consultation with physicians and other team members (BHPs)
- Warm Hand Offs
- Note Writing
- Record Review
- Administration
- Coordinating care (for example, teachers and school staff- disproportionately higher for pediatric BHPs)

What works

- Team-based approach
 - All hands on-deck in the clinic
 - Large behavioral health integration (BHI) group to consult with as needed
- Patient access to care
 - Integration leads to ease of access
 - Destigmatization
- Funding
 - Continuing Education Units (CEUs)
 - Material/ supplies
 - Licensure
 - Conference fees and travel

General Barriers

- Insurance/ Billing
 - Changes in insurance can impact access to care
 - Limited number of approved sessions
 - Changes in insurance has led to early end of care
 - Increase care gap
 - No incentive for warm hand-offs (WHOs)
- Referring out
 - Patients do not always follow-through
 - Waitlists
 - Difficult to access (for example, transportation and financial)
- Time constraints
 - We can have some flexibility with session amount, but it is still limited

Barriers in Pediatrics & Working with 1–5-year-olds

- Billing/compensation
 - A diagnosis for very young children may be inappropriate but is necessary for billing
- Additional expertise/knowledge of child development
 - More risk involved when working with children
 - Additional legal/ethical rules related to children
- Additional time and work involved
 - Coordinating with other caregivers, providers and schools
- Family/Parent/Caregiver
 - Family schedule, siblings, childcare, school
 - Parent expectations and understanding of interventions and services
 - Parent conflict, divorce, parenting styles, generational differences

How can CCOs help? (1 of 2)

- Financial/Reimbursement Incentives
 - Increase motivation for psychologists to work with 1–5-year-olds and their families
- Clinical Support for BHPs
 - Consultation services for complex cases
 - Risk management assistance services for clinicians
- Revise relative value unit (RVU) requirements
 - Address increased work involved
 - Talking with families, coordinating and collaborating care, writing letters, warm hand-offs (WHOs)
 - Equitable RVU/ reimbursement rates for Psych and health behavior assessment and intervention (HBAI) CPT codes

How can CCOs help? (2 of 2)

- Trainings
 - Work with graduate school programs to offer mandatory pediatric training during their programs
 - Specific interventions to work with pediatric population and their families
 - Legal nuances working with children
 - Consent and assent
 - Custody
 - Foster care system
 - Coordination with other caregivers/providers
 - Importance of caregiver mental health
 - Talking to and providing psychoeducation about BHP roles

Questions

Guidance documents


Frequently Asked Questions (FAQ)

- Provides answers to questions submitted by CCOs about the Social-Emotional Interventions for 1-5 quality metric.
- 2nd release expected June 2025. Submit additional questions to: metrics.questions@odhsoha.oregon.gov

Provider Resources for Workforce Development

- Provides information about training and resources to support workforce development for providers who deliver or want to deliver services included in the quality metric.

Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services CCO Quality Incentive Metric



FREQUENTLY ASKED QUESTIONS

Updated March 2025

Purpose

This document provides frequently asked questions and answers related to the Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services CCO quality incentive metric (Social-Emotional Interventions for 1-5 quality metric). This Frequently Asked Questions (FAQ) document adds to the [2025 measure specifications](#). Additional guidance and technical assistance can be found on Oregon Health Authority's (OHA) [Social-emotional health metric technical assistance webpage](#).

Please send questions to metrics.questions@odhsoha.oregon.gov.

Background

The Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services CCO quality incentive metric was developed by the measure stewards, [Oregon Pediatric Improvement Partnership \(OPIP\)](#). The vision is that children 1-5 years of age and their families have equitable access to services that support their social-emotional health and are the best match for their needs. CCOs can work toward this vision by targeting services most aligned with clinically recommended intervention services and improve the health care-based system of providers that the CCO contracts with that can provide these issue-focused intervention and treatment services. The intent of the quality metric is to measure and enhance the provision of intervention and


Social-Emotional Health is the developing capacity of a child from birth to 5 years old to:

- Form close and secure relationships with their primary caregivers and other adults and peers
- Experience, manage and express a full range of emotions
- Explore the environment and learn all in the context of family, community and culture

Babies, toddlers and young children can and do suffer from mental health conditions caused by trauma, neglect, biological factors and environmental situations that disrupt their social-emotional development. This metric focuses on children who experience issues with one or more of these social-emotional health factors.

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Social-Emotional Interventions for 1-5 Quality Metric FAQ
Updated March 2025

Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services CCO Quality Incentive Metric



Provider Resources for Workforce Development

Developed by the Oregon Rural Practice-based Research Network (ORPRN) and the Oregon Health Authority (OHA) Transformation Center to support implementation of the Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services (Social-Emotional Interventions for 1-5) CCO Quality Incentive Metric

Purpose

The Young Children Receiving Social-Emotional Issue-Focused Interventions/Treatment Services CCO quality incentive metric (Social-Emotional Interventions for 1-5 quality metric) measures the number of CCO members (children ages 1-5) who receive any of the issue-focused interventions/treatment services included in the set of 44 CPT codes. Ensuring that there are enough providers available with the necessary expertise is critical for CCOs to be able to provide these services.

This guide is intended for **Coordinated Care Organizations (CCOs)**. It provides information about training and resources to support workforce development for providers who deliver or want to deliver services included in the quality metric. More information about the issue-focused interventions/treatment services included in this quality metric can be found in the [2025 measure specifications](#) and the [Coding and Billing Guidance document](#).

Background

The Social-Emotional Interventions for 1-5 CCO quality incentive metric was developed by the measure steward, the [Oregon Pediatric Improvement Partnership \(OPIP\)](#).

The vision: Children 1-5 years of age and their families have equitable access to services that support their social-emotional health and are the best match for their needs. CCOs can work toward this vision by targeting services most aligned with clinically recommended intervention services and improve the health care-based system of providers that the CCO contracts with that can provide these issue-focused intervention and treatment services.

The intent: To measure and enhance the provision of intervention and treatment services for children 1-5 years of age with identified social-emotional needs or issues.

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Upcoming Technical Assistance Opportunities

See OHA's [Technical Assistance webpage](#) for a full calendar of TA events for this quality metric.

Contact Information

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Thank you

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<https://www.oregon.gov/oha/hpa/dsi-tc/pages/index.aspx>

