



## DIAMOND initiative – reimbursement update

### Background information

Since 2008, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) have been participating in a collaborative effort along with the Minnesota Department of Human Services (DHS) and other health plans in Minnesota called the Depression Improvement Across Minnesota Offering a New Direction (DIAMOND) Initiative. The DIAMOND Initiative collaborative was organized by the Institute for Clinical Systems Improvement (ICSI). The goal of the DIAMOND Initiative is to improve care for people who have depression by providing services through a new care model offered in select primary care settings.

### Provider participation

The DIAMOND Initiative is offered at select primary care settings that have been approved to participate by ICSI and have been trained in the DIAMOND care model. The DIAMOND care model includes adding a care manager and consulting psychiatrist to the patient's treatment team.

### Reimbursement update

Only those primary care providers that meet all the following criteria will be eligible for reimbursement:

- Certified or approved by ICSI
- Trained in the DIAMOND care model
- Contracted by Blue Cross
- Elected to participate in the DIAMOND Initiative

Effective for dates of service on or after November 1, 2010, the Blue Cross allowed amount will be up to \$100.00 plus applicable MinnesotaCare tax for eligible members and eligible providers up to a maximum of 12 consecutive months per member.

### Services and billing

Approved providers should bill electronically using HCPCS\* code T2022 (billed as one unit per calendar month) on a professional claim format (837P). This code will include any services rendered by the care manager, the consultative time the primary care physician/psychiatrist spends with the care manager, and any non-face-to-face time the physician spends reviewing, managing or coordinating care on behalf of the patient. Services need to be billed on a monthly basis to the health plan that insured the patient at the beginning of the month in which service occurred. The provider should bill this code on a monthly basis for a maximum of 12 consecutive months or until the member opts out of the DIAMOND Initiative, whichever comes first.

### Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.

\*HCPCS stands for Health Care Procedure Coding System.