PC-MHI Stop Code Guidance

This document provides updated information on the use of DSS Identifiers (stop codes) for integrated mental health care within the PACT (Primary Care – Mental Health Integration, PCMHI)

Stop	Position	Name	Usage Considerations	DSS Official Description
Code				
The follo	wing stop cod	des identify PC	MHI care and must be used in the primary position. (The sole exc	eption is when used secondary to a telephone code).
534	Either (Primary)	MH Integrated Care - Individual	 If used improperly in the secondary position, will not count towards important metrics Commonly used secondary codes include provider codes (e.g., 510, psychologist) or clinic codes (e.g., 420, pain clinic) Telemental health visits require appropriate location-based secondary codes: 690 (originating patient station); 692 (provider station – same STA3); 693 (provider station – different STA3) 	Records individual outpatient visits for mental health integrated care by a mental health provider in Primary Care-Mental Health Integrated programs. Use in the credit position only when combined with a telephone code.
539	Primary	MH Integrated Care - Group	 If used improperly in the secondary position, will not count towards important metrics Use of 534 in combination with a secondary group code (such as 550) is not appropriate for indicating group encounters Commonly used secondary codes include provider codes (e.g., 558, psychologist-led group) or clinic codes (e.g., 420, pain clinic) Telemental health visits require appropriate location-based secondary codes: 690 (originating patient station); 692 (provider station – same STA3); 693 (provider station – different STA3) 	Records group outpatient visits for mental health integrated care by a mental health provider in Primary Care-Mental Health Integrated programs.
The follo position.	wing telepho	ne codes refle	ct PCMHI care when the 534 stop code is used in the credit (secon	dary) position. Telephone codes are always used in the primary
527 /534		Mental Health Telephone	Use of 527/534 coding not limited to telephone care management; can include other types of telephone-based mental health care and follow up	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the Mental Health service. Includes the administrative and clinical services.*
338 /534		PACT Telephone		Records telephone care in officially designated primary care clinics (322, 323, 348, 350, 531). The code will be used to set-up telephone clinic profiles for members of the Primary Care Team and should be associated with an appropriate discipline specific stop code in the secondary position. Primary Care Telephone Clinic profiles, workload generation, and documentation requirements will remain consistent with VHA policy and guidance. Includes patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next-of-kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical/professional staff assigned to a Primary Care Team. Includes the provider and support services.*

^{*}Applicable to both telephone codes: Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

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What kinds of services are indicated by use of these stop codes?

There are two primary types of services provided in Primary Care-Mental Health Integration programs. One type is Co-located Collaborative Care. This consists of both mental health and primary care practitioners being physically present in the primary care setting, with shared responsibility for evaluation, treatment planning, and monitoring outcomes for common mental health conditions. The other type is Care Management. Care managers provide complementary services including education, ongoing assessment, monitoring of adherence to treatment, and referral management. Both types of services enable responsibility for mental health treatment to remain in the primary care setting.

What are Stop Codes?

The formal name for a stop code is DSS Identifier. DSS Identifiers are 3 digit, standardized codes used to characterize VHA outpatient clinics. They identify the work group primarily responsible for providing a clinical service, and are used for purposes of workload credit, managerial accounting, and program evaluation. A single stop code may be used alone, or it may be combined with a second (which modifies it) to form a pair. In this case, the first stop code in the pair is said to be in the primary position and the second in the secondary or credit position. For more background information regarding DSS Identifiers, please see the VHA Decision Support Office's web page regarding DSS identifiers (http://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss.med.va.gov/programdocs/pd_oident.asp), and in particular the first two documents on that page, https://vaww.dss