

UMBRA REIMBURSEMENT GUIDE

COMMUNITY HEALTH INTEGRATION (CHI)



CHI services address unmet Social Determinants of Health (SDOH) that interfere with medical or mental health care. These services help patients overcome real-world barriers—such as lack of housing, food, or transportation—to ensure they can engage in their treatment plan.

INITIATING VISIT REQUIREMENTS

CHI services must follow an initiating visit, performed by a Supervising Provider.

- **Accepted CPT/HCPCS codes:**
 - E/M: 99202–99205 or 99212–99215
- SDOH barriers must be documented at the initiating visit
- Must occur **before** CHI services begin
- Annual re-initiation is required for continued billing

ELIGIBLE PATIENTS

- Medicare Part B, not on a Medicare Advantage plan
- Must have **documented unmet SDOH**
- Consent must be documented (oral or written)

Patients are not eligible:

- During inpatient stays – including hospital, skilled nursing facility (SNF), or inpatient psychiatric facilities
- While a patient is receiving hospice or home health services
- Or while the patient is under care management that includes the same services (e.g., Comprehensive Care Management within a SNF)

AUTHORIZED BILLING PROVIDERS

Physician (MD, DO), Nurse Practitioner (NP), Physician Assistant (PA), Certified Nurse Midwife (CNM), Certified Nurse Specialist (CNS)

- Must:
 - Perform the initiating visit and identify SDOH
 - Determine medical necessity
 - Oversee services personally or via general supervision
 - Re-consent patient if provider changes
 - Review new SDOH data collected during CHI

AUXILIARY PERSONNEL

Community Health Workers (CHWs), Board Certified Patient Advocates (BCPAs), Registered Nurses (RNs), Licensed Practical Nurses (LPNs), Social Workers (MSW, LCSW), Certified Peer Support Specialist (CPSS)

- May provide services under **general supervision**
- Must be trained in:
 - Community resource navigation
 - Advocacy and facilitation
 - Cultural competence and ethical conduct

CODING & BILLING

CODE	DESCRIPTION	TIME
G0019	CHI	≥60 min
G0022	Additional 30 min	—

SERVICE ELEMENTS

- SDOH screening and documentation
- Facilitating access to food, housing, transport, utilities
- Patient-centered assessment
- Referral to services
- Education and self-advocacy
- Behavioral change support
- Coordination with healthcare and social services
- Emotional/social support



DOCUMENTATION

- Initiating Visit furnished by Supervising Provider
- Patient Consent
- Diagnosis and treatment goals
- Identified SDOH (documenting Z codes, a subset of ICD-10-CM diagnosis code is recommended, especially the Z55–Z65 range which relates to SDOH)
- Time logs by Auxiliary Personnel
- Methods used to support change, education, navigation
- Referral outcomes and coordination efforts
- Action Plan

CO-OCCURRING SERVICES

Can bill alongside:

- Principal Illness Navigation (PIN) and Principal Care Management (PCM)
- Cannot bill CHI if patient is receiving home health services

Have questions?

Email them to Medicare@UmbraHealthAdvocacy.com



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