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Empowering Dementia Caregivers: Incorporating Caregiving Training Resources Into Current Procedural Technology Codes

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Corresponding Author:	Eunjung Ko, MSN, RN, AGPCNP-BC The Ohio State University College of Nursing Columbus, OH UNITED STATES
Corresponding Author Secondary Information:	
Corresponding Author's Institution:	The Ohio State University College of Nursing
Corresponding Author's Secondary Institution:	
First Author:	Eunjung Ko, MSN, RN, AGPCNP-BC
First Author Secondary Information:	
Order of Authors:	Eunjung Ko, MSN, RN, AGPCNP-BC
	Karen M Rose, PhD, RN, FGSA, FAAN
	Kathy D Wright, PhD, RN, APRN-CNS, PMHCNS-BC, FAAN
Order of Authors Secondary Information:	
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Abstract:	<p>Purpose/Objectives: We aim to explore Current Procedural Terminology codes for caregiving training services and their potential impacts on caregivers of people living with dementia.</p> <p>Description of the Project/Program: In response to the growing need for support for caregivers of people living with physical and mental health issues, CPT codes for caregiving training services will be activated for the calendar year 2024. These codes cover: 1) family group behavior management and modification training services and 2) caregiver training for techniques to help patients maintain their quality of life. Caregivers will access such training support through the CPT codes provided by treating practitioners. The duration of training will vary by code.</p> <p>Outcome: Implementing CPT codes for caregiver training services highlights the vital role of caregivers in patient care. This support may improve their skills and communication with healthcare providers. However, timing and accessibility in care delivery need clarification, especially for caregivers of people living with dementia. Regular skill assessment and culturally competent care are essential. Before providing the service, provider training may also promote person-centered care, benefiting patients and their caregivers.</p> <p>Conclusion: Activating CPT codes for caregiving training services may enhance caregivers' support and skills, including dementia care.</p>

Author Information

1. Eunjung Ko, MSN, RN, AGPCNP-BC

PhD candidate

The Ohio State University College of Nursing

Address: 1585 Neil Avenue, Columbus, OH 43210

Phone number: 929-319-3069

Email address: ko.363@buckeyemail.osu.edu

2. Karen M. Rose, PhD, RN, FGSA, FAAN

Dean and professor

The Ohio State University College of Nursing

Address: Heminger Hall, 1585 Neil Avenue, Columbus, OH 43210

Phone number: 614-292-4844

Email address: rose.1482@osu.edu

3. Kathy D. Wright, PhD, RN, APRN-CNS, PMHCNS-BC, FAAN

Assistant professor

The Ohio State University College of Nursing

Address: 376 Newton Hall, 1585 Neil Avenue, Columbus, OH 43210

Phone number: 614-292-0309

Email address: wright.2104@osu.edu

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Eunjung Ko, MSN, RN, AGPCNP-BC¹ | Karen M. Rose, PhD, RN, FGSA, FAAN¹ | Kathy D.
Wright, PhD, RN, APRN-CNS, PMHCNS-BC, FAAN¹

¹College of Nursing, The Ohio State University

Corresponding Author

Eunjung Ko, College of Nursing, The Ohio State University, 1577 Neil Avenue, Columbus, OH
43210, USA

Email: ko.363@buckeyemail.osu.edu

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Conclusion: Activating CPT codes for caregiving training services may enhance caregivers' support and skills, including dementia care.

Background

The expected growing number of people living with dementia and their caregivers is a pressing concern in today's healthcare in the United States.¹ Caregivers of people living with dementia undertake various responsibilities, from symptom management and emotional support to maintaining the care recipient's daily activities of living, necessitating more time and effort compared to caregivers of those without dementia.^{2,3} Such commitment to caregiving can cause substantial burden, stress, and unmet needs for information related to their caregiving duties.^{1,4,5} Unmet needs emerging while providing care for people living with dementia can increase due to care recipients' dementia-related symptoms, and this increase can cause reduced caregiving satisfaction and a higher level of caregiving burden. However, caregiver needs can be met by providing formal support, which may improve levels of caregiving satisfaction and burden.⁶ This indicates the importance of long-needed attention for caregivers of people living with dementia and support from healthcare services and policymakers.

In response to this growing need, the Centers for Medicare & Medicaid Services and the Department of Health and Human Services took a significant step in calendar year 2024 payment policies under the physician fee schedule.⁷ To provide additional supports, Current Procedural Terminology (CPT) codes concerning caregiving training services will be activated, aiming to make enhancements for caregivers who provide care for Medicare recipients.⁷ In 2024, healthcare providers have access to a set of CPT codes that address caregiving training services, which includes the activation of existing codes (96202 and 96203) and three new codes (9X016, 9X016, 9X017).⁷ In the past, healthcare organizations often focused primarily on delivering services to Medicare beneficiaries, with a lack of focus on caregivers.⁷ Including caregiving components within the CPT codes can imply an upturn in the status of caregivers by accepting

the importance of caregivers' involvement in patient care.⁸ To make these proposed changes more meaningful, there is a need to consider better ways of providing caregivers with support under the proposed CPT codes at the right times and places.

What are Caregiving Training Resources?

The CPT codes for caregiving training services were developed to achieve high-quality care for people with various illnesses and healthcare needs.⁷ The proposed CPT codes for caregiving training Medicare services are divided into two categories: 1) multiple family group behavior management and modification training services (codes 96202 and 96203) and 2) caregiver training for techniques to help patients maintain the quality of life, including basic and instrumental activities of daily living and problem-solving (codes 9X015, 9X016, 9X017).⁷ Caregiver training for patients in the first category should align with the patient's treatment plan to qualify for Medicare coverage. The second category is considered as 'sometimes therapy,' meaning these services can be provided when the physical therapists, occupational therapists, and speech-language pathologists are part of a therapy plan.⁷

In the proposal rule,⁷ caregivers eligible for the training support are defined as individuals who provide care and serve as a proxy for a patient with an acute or chronic mental or physical illness in all the caregiving experiences, from episodic to continuous care. They can be family members, friends, neighbors, or guardians.⁷ The services can be offered by treating practitioners, such as physicians, nurse practitioners, physician assistants, or clinical nurse specialists.⁷ These codes cannot be coded along with some other codes that are considered primary care services and may have similar components to the CPT codes for caregiving training services (e.g., transitional care management, chronic care management, behavioral health integration services, virtual check-in services).⁷

The timing for these services varies depending on the specific code. For example, code 96202 necessitates an initial 60 minutes, while 9X015 requires an initial 30 minutes.⁷ Codes 96203 and 9X016 are provided an additional 15 minutes each, in addition to the time allocated for codes of 96202 and 9X015.⁷ The time spent for training with code 9X017 is not specified.⁷ These services are typically conducted face-to-face in clinical settings, ensuring a supportive and controlled environment. Consent forms are typically required, and the care provided is individualized to meet the unique needs of each patient and caregiver dyad, recognizing the importance of personalized care in achieving the best outcomes.⁷

What Can be Anticipated by the Change?

Implementing CPT codes concerning the assistance and education of caregivers can highlight that caregivers have a pivotal role in providing care for people with illness and promoting the well-being of the care recipients. This support enables caregivers to effectively develop and employ their caregiving abilities, ensuring their capacity to deal with caregiving challenges in a timely manner. Moreover, providing caregiving resources through the CPT codes can get the healthcare providers paid for their efforts and improve their communication with caregivers, developing therapeutic rapport.

However, there are several points to be considered. First, it is essential to address the specific timing at which the healthcare provider initiates the provision of these services. Dementia-related diseases manifest a wide range of symptoms, including apathy, depressive mood, agitation, acting out, paranoia, wandering, appetite changes, and others.⁹ However, such symptoms occur unexpectedly. Therefore, providing such resources regularly may be beneficial, for instance, when it is detected that the care recipients' cognitive and behavioral symptoms and when their health status are declined during the medical appointment. Second, further

clarification is required about the topic of "where," particularly, within the context of telehealth. Caregivers of people living with dementia may have difficulties leaving home due to their care recipients' behavioral and psychological symptoms requiring 24/7 care.¹⁰ Allowing the providers to use the CPT codes for caregiving training services online as well as in person may increase the accessibility of the training and may allow caregivers of people living with dementia to save their time and energy.¹⁰

There are no recommendations or mandates regarding the delivery methods of training. Some healthcare providers may want to teach the activities in a lecture format, while others may prefer observing the caregivers' actions and skills through mock practice for check-ups. While the methods may vary from providers, dependent upon time, space, and accessibility issues, it is important to incorporate regular assessment of knowledge and skills regarding behavioral management and caregiving techniques into the caregiving training consultations, which may guarantee high-quality dementia care in each caregiver. Moreover, the instruction should include educational materials that incorporate cultural preferences for the intended learners. Offering providers training before they use the service codes for caregivers of their patients may help the providers focus on person-centered care and provide caregivers with suitable, individualized educational information.

Conclusion

In conclusion, activating the CPT codes for caregiving training services can potentially empower caregivers in dementia care, and clarification points will further enhance their influence and support for caregivers. To succeed in using the CPT codes for caregiving training and providing caregivers with appropriate knowledge and techniques in a timely manner, health professionals need to be trained and be involved in developing customized educational materials

for caregivers. This step can ensure that caregivers receive the best possible guidance and support to carry out their responsibilities effectively.

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