

<u>Commonly Used Service Codes for Prescribers – Medical</u> <u>Doctor (MD/DO), Physician Assistant (PA), Psychiatric</u> <u>Nurse Practitioner (NP), Certified Nurse Specialist (CNS)</u>

- > The list below contains the codes most commonly used by MHRS's and MHW's. It is not a definitive list of codes available for these classifications to use. For more codes, detailed descriptions, and information on code usage, refer to the current Approved Yolo County SMHS Codes.
- All HCPCS codes listed that begin with letters H or T bill in 15-minute units and multiple units are allowed. Minimum billing time is 8 minutes.

Code	Description	Guidance		
ASSESSMENT				
90885MH	Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes	Billing limited to one 15-minute unit		
96127MH	Brief Emotional/Behavioral Assessment	 Using standardized assessment tool Billing limited to one 15-minute unit		
96110MH	Developmental Screening	Using standardized screening toolBilling limited to one 15-minute unit		
9944XMH	Telephone Evaluation and Management	• 5-30 minutes billing range		
H2000MH	Comprehensive Multidisciplinary Evaluation			
CRISIS INTERVENTION SERVICES				
90839МН	Psychotherapy for Crisis	 Use 90840MH for services beyond 74 min Use H2011 for services less than 30 min or when provided via methods other than inperson 		
90840MH	Psychotherapy for Crisis, each additional 30 minutes	 Add-on code for crisis psychotherapy beyond 74 minutes Up to 13 units allowed 		
H2011MH	Crisis Intervention Services			
MEDICATION SUPPORT SERVICES – Evaluation and Management				
9920XMH	Office or Other Outpatient Visit of New Patient	15-74 minutesUse for Initial Medication Evaluations		

		Use G2212 for additional 15-minute increments beyond 74 minutes
9921XMH	Office or Other Outpatient Visit of an Established Patient	 10-54 minutes Use G2212 for additional 15-minute increments beyond 54 minutes
INTENSIVE CA	RE COORDINATION (ICC)	
T1017MHICC	ICC Case Management	
PLAN DEVELO	PMENT	
99366МН	Medical Team Conference with Interdisciplinary Team, Participation by Non- Physician, Face-to-Face with Patient and/or Family	 PA, NP, CNS Minimum 30 minutes required to bill
99367MH	Medical Team Conference with Interdisciplinary Team, Participation by Physician, Patient or Family Not Present	 MD/DO Only Minimum 30 minutes required to bill Use E&M codes to report time spent in a team conference with the patient and/or family/caregiver present (9920XMH & 9921XMH)
99368MH	Medical Team Conference with Interdisciplinary Team, Participation by Non- Physician, Patient or Family Not Present	PA, NP, CNSMinimum 30 minutes required to bill
99484MH	Care Management Service for Behavioral Health Conditions, Directed by Physician	Minimum 20 minutes required to bill
H0032MH	Mental Health Service Plan Developed by Non-Physician	• PA, NP, CNS
REFERRAL & C	ONSULTATION	
T1017MH	Targeted Case Management	
99451MH	Inter-Professional Telephone/Internet/Electronic Health Record Assessment Provided by a Consultative Physician	 MD/DO Only Billing time 5-15 minutes
THERAPY		
9083XMHEM	Individual Psychotherapy when Performed with an Evaluation and Management Service	 Add-on code. To bill in conjunction with E&M codes, the two services must be significant and separately identifiable

		Minimum 16 minutes required to bill		
9083XMH	Psychotherapy	Minimum 16 minutes required to bill		
90847MH	Family Psychotherapy, 50 min	Minimum 26 minutes required to bill		
90849MH	Multiple-Family Group Psychotherapy	Billing limited to one 15-minute unit		
90853MH	Group Psychotherapy (Other Than of a Multi- Family Group)	Billing limited to one 15-minute unit		
SUPPLEMENTAL SERVICES				
90887MH	Interpretation or Explanation of Results of Psychiatric or Other Medical Examination and Procedures, or Other Accumulated Data to Family or Other Responsible Persons or Advising them How to Assist Patient	Add on codeBilling limited to one 15-minute unit		
ADD-ON CODES				
90785MH	Interactive Complexity			
T1013MH	Sign Language or Oral Interpretive Services			
G2212MH	Prolonged Office or Other Outpatient Evaluation and Management Service Beyond the Maximum Time	 For use with Evaluation and Management codes, New Patient beyond 74 minutes, Est Patient beyond 54 minutes Minimum 15 minutes required to bill Multiple units allowed 		