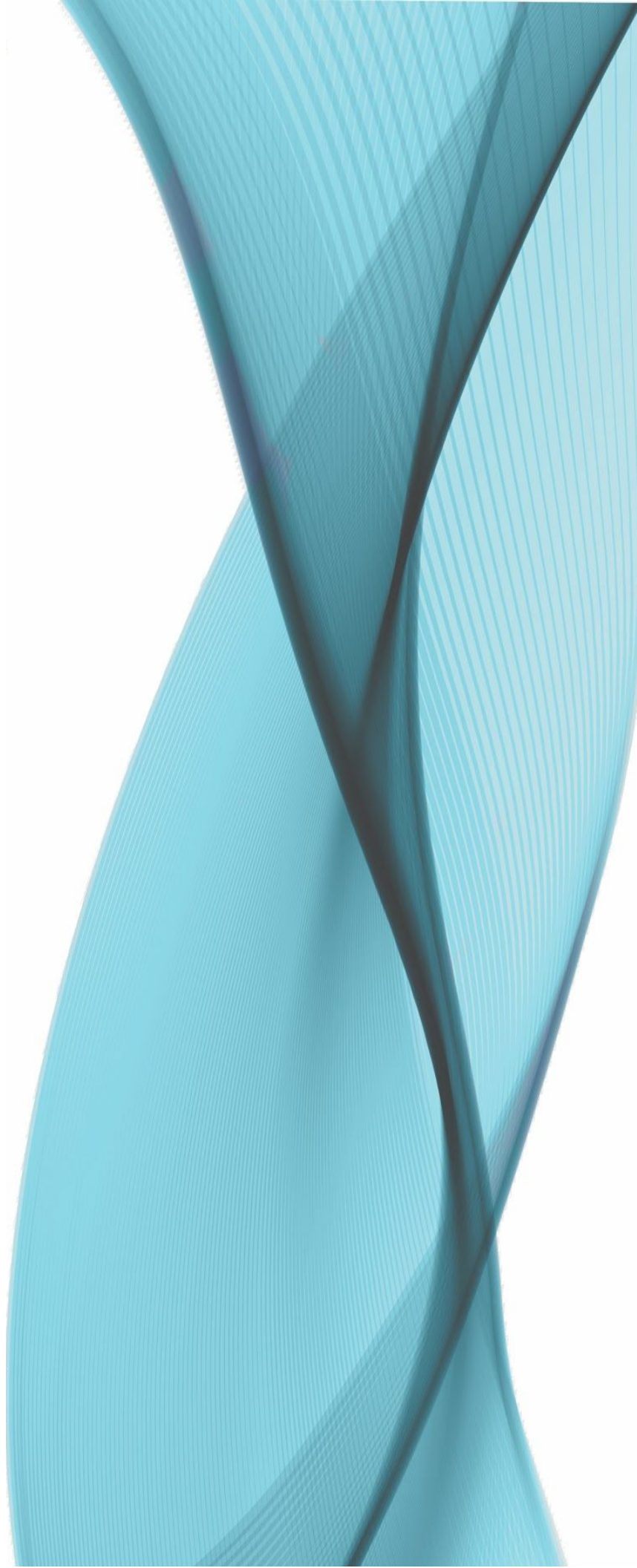


TELEBEHAVIORAL HEALTH™

I N S T I T U T E

21st Century Behavioral Health Strategies

2018 CPT CODES



2018 CPT CODES

Telebehavioral Health Institute Report

No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, recording or otherwise, without the prior written permission of the author or publisher.

This publication is protected under the US Copyright Act of 1976 and all other applicable international, federal, state and local laws.

Medicare Telehealth Services

CMS finalizes its proposal to add seven services to the Medicare telehealth list. In response to requests received in 2016, CMS added three codes because it believes these services are sufficiently similar to services currently on the telehealth services list (this is known as qualifying on a category 1 basis):

- HCPCS code G0296: Counseling visit to discuss the need for lung cancer screening using low dose computed tomography (LDCT).
- CPT codes 90839 and 90840: Psychotherapy for crisis; first 60 min.
 - CMS adds the code with the explicit condition that for payment the distant site practitioner must be able to mobilize resources at the originating site to diffuse the crisis and restore safety, when applicable, when the codes are furnished by telehealth. CMS states this requirement is consistent with the CPT prefatory language that the treatment described by these codes requires, “mobilization of resources to defuse the crisis and restore safety.” CMS states it believes “mobilizing resources” is the ability to communicate with and inform staff at the originating site to the extent necessary to restore safety.

CMS also adds four add-on CPT and HCPCS codes to the telehealth list. CMS notes that these add-on codes describe additional elements for services currently on the telehealth list and would only be considered telehealth services when billed as add-on to codes on the telehealth list.

- CPT code 90875: Interactive complexity.
- CPT codes 96160 and 96161: Administration of patient-focused health risk assessment instrument and Administration of caregiver-focused health risk assessment instrument.
- HCPCS code G0506: Comprehensive assessment or/and care planning for patients requiring chronic care management services.

1. Elimination of the Required Use of the GT Modifier on Professional Claims

Effective January 1, 2017, Place of Service (POS) code 02 Telehealth is required on professional claims for telehealth services. With this new POS code, CMS finalizes its proposal to eliminate the required use of the GT modifier on professional claims.

Because institutional claims do not use a POS code, distant site practitioners billing under CAH Method II need to continue to use the GT modifier on institutional claims. In addition, federal telemedicine programs in Alaska or Hawaii will need to retain the GQ modifier as required.

2. Specific Requests for Comments

a. Remote Patient Monitoring

To address some of the concerns raised by commenters regarding the broad nature of CPT code 99091, CMS will apply certain requirements (similar to those for reporting chronic care management services) for billing this service in 2018 as follows:

- Practitioner must obtain beneficiary consent for the service and document this in the patient's record
- For new patients or patient not seen by the billing practitioner within 1 year of billing this code, CMS will require initiation of this service during a face-to-face visit with the billing practitioner. Levels 2 through 5 E/M visits (CPT codes 99212 through 99215) and the face-to-face visit included in transitional care management services (CPT codes 99495 and 99496) would qualify
- Should not be reported more than once in a 30-day period
- Code can be billed once per patient during the same service period as chronic care management, transitional care management, and behavioral health integration codes.

3. Telehealth Originating Site Facility Fee Payment Amount Update

For 2018, the payment amount for HCPCS code Q3014 (Telehealth originating site facility fee) is \$25.76 or 80 percent of the actual charge, whichever is lesser.

2017 CPT Codes

90791	Psych Diagnostic Evaluation	Psychiatric diagnostic interview without medical services
	Psych diag w/ med services	Psychiatric diagnostic interview (for prescribers/medical services)
90832	Psytx pt&/family 30 minutes	Individual psychotherapy, 30 minutes with patient and/or family member
	Psytx pt&/fam w/e&m 30 min	Individual psychotherapy, 30 minutes with patient and/or family member when performed with an evaluation and management service
90834	Psytx pt&/family 45 minutes	Individual psychotherapy, 45 minutes with patient and/or family member
90836	Psytx pt&/fam w/e&m 45 min	Individual psychotherapy, 45 minutes with patient and/or family member when performed with an evaluation and management service
90837	Psytx pt&/family 60 minutes	Individual psychotherapy, 60 minutes with patient and/or family member
90838	Psytx pt&/fam w/e&m 60 min	Individual psychotherapy, 60 minutes with patient and/or family member when performed with an evaluation and management service
90845	Psychoanalysis	Psychoanalysis
90846	Family psytx w/o patient	Family Psychotherapy (Without the Patient Present)

90847	Family psytx w/ patient	Family Psychotherapy (Conjoint Psychotherapy) (With Patient Present)
90951	Esrd serv 4 visits p mo <2 yr	End-stage renal disease (ESRD) - related services monthly, for patients under 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with four or more face-to-face visits per month.
90952	Esrd serv 2-3 visits p mo <2 yr	End-stage renal disease (ESRD) - related services monthly, for patients under 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with two to three face-to-face visits per month.
90954	Esrd serv 4 visits p mo 2-11	End-stage renal disease (ESRD) - related services monthly, for patients between 2 and 11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with four or more face-to-face visits per month.
90955	Esrd serv 2-3 visits p mo 2-11	End-stage renal disease (ESRD) - related services monthly, for patients between 2 and 11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with two to three face-to-face visits per month.
90957	Esrd serv 4 visits p mo 12-19	End-stage renal disease (ESRD) - related services monthly, for patients between 12 and 19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with four or more face-to-face visits per month.
90958	Esrd serv 2-3 visits p mo 12-19	End-stage renal disease (ESRD) - related services monthly, for patients between 12 and 19 years of age

		to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents, with two to three face-to-face visits per month.
90960	Esrd serv 4 visits p mo 20+	End-stage renal disease (ESRD) - related services monthly, for patients 20 years of age of age and over, with four face-to-face visits per month.
90961	Esrd serv 2-3 visits p mo 20+	End-stage renal disease (ESRD) - related services monthly, for patients 20 years of age of age and over, with two to three face-to-face visits per month.
96116	Neurobehavioral status exam	Neurobehavioral status exam
96150	Assess hlth/behav init	Health and Behavioral Assessment, initial
96151	Assess hlth/behav subseq	Health and Behavioral Assessment, Reassessment
96152	Intervene hlth/behav indiv	Health and behavior intervention, each 15 minutes, face to face; individual
96153	Intervene hlth/behav group	Health and behavior intervention, each 15 minutes, face to face; group (2 or more patients)
96154	Interv hlth/behav fam w/pt	Health and behavior intervention, each 15 minutes, face to face; family (with the patient present)
97802	Medical nutrition indiv in	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
97803	Medical nutrition indiv subseq	Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
97804	Medical nutrition group	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes.

99201	Office/outpatient visit new	Office/outpatient service - New patient
99202	Office/outpatient visit new	Office/outpatient service - New patient
99203	Office/outpatient visit new	Office/outpatient service - New patient
99204	Office/outpatient visit new	Office/outpatient service - New patient
99205	Office/outpatient visit new	Office/outpatient service - New patient
99211	Office/outpatient visit est	Office/outpatient service - Established patient
99212	Office/outpatient visit est	Office/outpatient service - Established patient
99213	Office/outpatient visit est	Office/outpatient service - Established patient
99214	Office/outpatient visit est	Office/outpatient service - Established patient
99215	Office/outpatient visit est	Office/outpatient service - Established patient
99231	Subsequent hospital care	Subsequent hospital care
99232	Subsequent hospital care	Subsequent hospital care
99233	Subsequent hospital care	Subsequent hospital care
99307	Nursing fac care subseq	Subsequent Nursing Facility Care
99308	Nursing fac care	Subsequent Nursing Facility Care

	subseq	
99309	Nursing fac care subseq	Subsequent Nursing Facility Care
99310	Nursing fac care subseq	Subsequent Nursing Facility Care
99354	Prolonged service office	Prolonged service in Office/Outpatient Setting
99355	Prolonged service office	Prolonged service in Office/Outpatient Setting
99406	Behav chng smoking 3-10 min	Behavior Change Interventions: Smoking and tobacco use cessation Time: 3-10 minutes
99407	Behav chng smoking >10 min	Behavior Change Interventions: Smoking and tobacco use cessation Time: More than 10 minutes
99495	Trans care mgmt 14 day disch	Transitional Care Management Services; Face-to-face visit, within 14 calendar days of discharge
99496	Trans care mgmt 7 day disch	Transitional Care Management Services; Face-to-face visit, within 7 calendar days of discharge
G0108	Diab manage trn per indiv	Diabetes outpatient self-management training services, individual, per 30 minutes
G0109	Diab manage trn per indiv/group	Diabetes outpatient self-management training services, group session (2 or more), per 30 minutes
G0270	Mnt subs tx for change dx	Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition or treatment regimen (including additional hours needed for renal disease), individual, face-to-face with the patient, each 15 minutes
G0396	Alcohol/subs	Alcohol And/Or substance (other than tobacco)

	interv 15-30 mn	Abuse structured assessment (e.g, Audit, dast), and brief intervention 15 to 30 minutes.
G0397	Alcohol/subs interv >30 mn	Alcohol And/Or substance (other than tobacco) Abuse structured assessment (e.g, Audit, dast), and brief intervention, greater than 30 minutes.
G0406	Inpt/tele follow up 15	Follow-up inpatient consultation, limited, physicians typically spend 15 minutes communicating with the patient via telehealth.
G0407	Inpt/tele follow up 25	Follow-up inpatient consultation, limited, physicians typically spend 25 minutes communicating with the patient via telehealth.
G0408	Inpt/tele follow up 25	Follow-up inpatient consultation, limited, physicians typically spend 35 minutes communicating with the patient via telehealth.
G0420	Ed svc cld ind per session	Face-to-face educational services related to the care of chronic kidney disease; individual, per session, per one hour
G0421	Ed svc cld grp per session	Face-to-face educational services related to the care of chronic kidney disease; group, per session, per one hour
G0425	Inpt/ed teleconsult30	Telehealth consultation, emergency department or initial inpatient, typically 30 minutes communicating with the patient via telehealth
G0426	Inpt/ed teleconsult50	Telehealth consultation, emergency department or initial inpatient, typically 50 minutes communicating with the patient via telehealth
G0427	Inpt/ed teleconsult70	Telehealth consultation, emergency department or initial inpatient, typically 70 minutes communicating with the patient via telehealth
G0436	Tobacco-use counsel 3-10 min	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate, greater than 3 minutes, up to 10 minutes

G0437	Tobacco-use counsel >10 min	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive, greater than 10 minutes
G0438	Ppps, initial visit	Annual wellness visit; includes a personalized prevention plan of service (pps), initial visit
G0439	Ppps, subseq visit	Annual wellness visit; includes a personalized prevention plan of service (pps), subsequent visit
G0442	Annual alcohol screen 15 min	Annual alcohol misuse screening, 15 minutes
G0443	Brief alcohol misuse counsel	Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes
G0444	Depression screen annual	Annual depression screening, 15 minutes
G0445	High inten beh couns std 30m	High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, includes: education, skills training and guidance on how to change sexual behavior; performed semi-annually, 30 minutes
G0446	Inten behave ther cardio dx	Annual, face-to-face intensive behavioral therapy for cardiovascular disease, individual, 15 minutes
G0447	Behavior counsel obesity 15m	Face-to-face behavioral counseling for obesity, 15 minutes
G0459	Telehealth inpt pharm mgmt	Inpatient telehealth pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy.

