



ALCOHOL, DRUG & MENTAL HEALTH SERVICES
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Memorandum

To: ACBHCS County Programs and Master Contract Providers

From: Donna Fone, MFT, LPCC, Interim QA Administrator

Date: May 28, 2015

RE: CPT Code Changes

Attention: BHCS County Clinics and Contractors of ACBHCS Mental Health services

As Medicare does not reimburse for non face-to-face services, effective with June 2015 services BHCS has created the ability to identify Assessment and CFE (or equivalent) Procedures that are non face-to-face by using two new codes identified below. (This will not be audited to until services effective 7/1/15.)

The procedure codes listed below separate Assessment (MH and Psychiatric) and CFE completion codes into face-to-face and non face-to-face codes. See below:

Evaluation

- 323 = 90791 Psychiatric Diag Eval (MH Assessment) when face-to-face with client and/or family member.*
- 565 = 90792 Psychiatric Diag Eval w/medical component (Psychiatric Assessment) when face-to-face with client and/or family member.*
- 325 = 90889: Companion to 323-90791 and 565-90792 (MH and Psychiatric Assessment) for non face-to-face Assessments.
- 324 = 90791 Behavioral Eval (completion of CFE, ANSA, CANS, etc.) when face-to-face with client and/or family member.*
- 326 = 90889 Behavioral Eval (completion of CFE, ANSA, CANS, etc.) when non face-to-face.



In addition please note:

- The InSyst procedure code 324 translation to a CPT code has been changed from 96151 to 90791. Be sure and make the appropriate internal change when billing Medicare or other health insurance.
- The new procedure codes 325-90889 and 326-90889 must first be billed to Medicare for all Medicare/Medi-Cal clients. The 90889 CPT code is not on the “2015 Medicare Fee schedule.” So, when you bill Medicare you should receive a denial reflecting the service is not covered and that denial should be reported to the Provider Relations Billing office on the “MHS Insurance Payment Notification” form. This will allow us to post a \$0.00 payment in InSyst, so that the claim may cross-over to Medi-Cal for reimbursement.
- The New InSyst Procedure Code Tablet is enclosed.

If you have any questions regarding the use of the codes please contact QA at 510-567-8105 or billing questions contact Provider Relations at 1 800 878-1313.

**Please note that if a Psychiatric Diag Eval, or Behavioral Eval, date of service includes both face-to-face time and non face-to-face time (write-up time for Assessment and Progress Note)—code that visit with the face-to-face code*

Alameda County Behavioral Health Care Services Agency
InSyst Procedure Code Table as of June 2015

InSyst Proc Code		CPT Code Medicare/Ins	HCPC CODE Medi-Cal	E/M	Actual Time	SFC	MD DO	Lic PhD	PA	Nurse Pract	CL Nurse Spec	Nurse	LCSW	MFT	LPCC	LPCC wFam	PhD Intern	Intern	RHB Coun	Unlic	Req Serv Loc
121	PHF Contract Day		H2013			20 - 29	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
141	Crisis Residential Day		H0018			40 - 49	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
165	Adult Residential Day		H0019			65 - 79	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
221	Crisis Stabilization		S9484			20 - 24	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
281	Day Care Intens Half Day		H2012			81 - 84	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
282	Day Care Intens AB3632 Half		H2012			81 - 84	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
285	Day Care Intens Full Day		H2012			85 - 89	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
286	Day Care Intens Full-AB3632		H2012			85 - 89	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
291	Day Care Rehab Half Day		H2012			91	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
292	Day Care Rehab Half-AB3632		H2012			91	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
295	Day Care Rehab Full Day		H2012			95	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
296	Day Care Rehab Full-AB3632		H2012			95	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
310	Collateral-Caregiver		H2015			10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
311	Collateral		H2015			10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
317	Collateral Family Group		H2015			10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
498	Therapeutic Behavioral Svcs		H2019			58	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
571	Brokerage Services		T1017			01-08	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
581	Plan Development		H0032			30	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	EVALUATION																				
323	90791 Psychiatric Diag Eval (Assessment)	90791***	H2015			30	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
565	90792 Psychiatric Diag Eval w/medical	90792***	H2015	X		60	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
325	90889 Psy Diag Eval (non face/face)	90889	H2015			30	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
324	90791 Behavioral Eval (CFE,ANSA,CANS)	90791***	H2015			30	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
326	90889 Behav Eval (CFE,ANSA,CANS non face/face)	90889	H2015			30	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	REHAB																				
381	Individual Rehabilitation	H2017**	H2017			40	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
391	Group Rehabilitation	H2017**	H2017			50	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	THERAPY																				
441	90832 Psychotherapy 30 min	90832***	H2015		16-37	40	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
465	90833 + PsyThpy with E/M 30 min	90833***	H2010	X	16-37	60	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
442	90834 Psychotherapy 45 min	90834***	H2015		38-52	40	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
467	90836 + PsyThpy with E/M 45 min	90836***	H2010	X	38-52	60	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
443	90837 Psychotherapy 60 min	90837***	H2015		53 >	40	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
468	90838 + PsyThpy with E/M 60 min	90838***	H2010	X	53 >	60	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
413	90846 FAMILY PSYCH WO PATIENT	90846	H2015			10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
449	90847 FAMILY PSYCH W PATIENT	90847	H2015			40	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	GROUP THERAPY																				
455	90849 MULTI FAMILY GRP PSYCH	90849	H2015			50	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
456	90853 GROUP PSYCHOTHERAPY	90853***	H2015			50	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	CRISIS INTERVENTION																				
377	90839 Crisis Thpy 60 min	90839**	H2011		30-75	70	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
378	90840 + Crisis Thpy ADD 30 min	90840**	H2011		16-45	70	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
690	90839 CCRP Mobile Crisis 60min (county only)	90839	H2011		30-75	70 - 78	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
	E & M																				

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471	99341 E/M HOME NEW PROBFOC 20M	99341	H2010	X	1-25	60	X		X	X	X											4
472	99342 E/M HOME NEW EXPAND 30M	99342	H2010	X	26-37	60	X		X	X	X											4
473	99343 E/M HOME NEW DETAIL 45M	99343	H2010	X	38-52	60	X		X	X	X											4
474	99344 E/M HOME NEW COMPRE 60M	99344	H2010	X	53-67	60	X		X	X	X											4
475	99345 E/M HOME NEW COMPLEX 75M	99345	H2010	X	68>	60	X		X	X	X											4
476	99347 E/M HOME EST PROBFOC 15M	99347	H2010	X	1-20	60	X		X	X	X											4
477	99348 E/M HOME EST EXPAND 25M	99348	H2010	X	21-32	60	X		X	X	X											4
478	99349 E/M HOME EST DETAIL 40M	99349	H2010	X	33-50	60	X		X	X	X											4
479	99350 E/M HOME EST COMPLEX 60M	99350	H2010	X	51>	60	X		X	X	X											4
545	99201 E/M NEW OFC SIMPLE 10 MIN	99201*	H2010	X	1-15	60	X		X	X	X											
546	99202 E/M NEW OFC EXP 20 MIN	99202*	H2010	X	16-25	60	X		X	X	X											
547	99203 E/M NEW OFC DETAIL 30 MIN	99203*	H2010	X	26-37	60	X		X	X	X											
548	99204 E/M NEW OFC COMPRE 45 MIN	99204*	H2010	X	38-52	60	X		X	X	X											
549	99205 E/M NEW OFC COMPLEX 60MIN	99205*	H2010	X	53 >	60	X		X	X	X											
641	99211 E/M EST OP SIMPLE 5MIN	99211	H2010	X	1-7	60	X		X	X	X											
643	99212 E/M EST OP PROBOCUS 10MIN	99212	H2010	X	8-12	60	X		X	X	X											
644	99213 E/M EST OP EXPANDED 15MIN	99213	H2010	X	13-20	60	X		X	X	X											
645	99214 E/M EST OP MOD COMPL 25M	99214	H2010	X	21-32	60	X		X	X	X											
646	99215 E/M EST OP HIGHCOMPL 40M	99215	H2010	X	33 >	60	X		X	X	X											
650	99306 SNF E/M INIT HGHCOMP 45M	99306	H2010	X	41 >	60	X		X	X	X											23
653	99307 SNF SUB E&M STRAIGHTFWD 10	99307	H2010	X	1-12	60	X		X	X	X											23
654	99308 SNF SUB E&M LOW COMPLEX 15	99308	H2010	X	13-20	60	X		X	X	X											23
655	99309 SNF SUB E&M MODERATE COM 25	99309	H2010	X	21-30	60	X		X	X	X											23
656	99310 SNF SUB E&M HIGH COMPLEX 35	99310	H2010	X	31 >	60	X		X	X	X											23
657	99304 SNF E/M INIT LOWCOMP 25M	99304	H2010	X	1-30	60	X		X	X	X											23
658	99305 SNF E/M INIT MODCOMP 35M	99305	H2010	X	31-40	60	X		X	X	X											23
660	99324 E/M BRDCAR NEW PROBF 20M	99324	H2010	X	1-25	60	X		X	X	X											24
661	99325 E/M BRDCAR NEW EXPD 30M	99325	H2010	X	26-37	60	X		X	X	X											24
662	99326 E/M BRDCAR NEW DETAIL 45	99326	H2010	X	38-52	60	X		X	X	X											24
663	99327 E/M BRDCAR NEW COMPR 60M	99327	H2010	X	53-67	60	X		X	X	X											24
664	99328 E/M BRDCAR NEW COMPX 75M	99328	H2010	X	68>	60	X		X	X	X											24
665	99334 E/M BRDCAR EST PROBF 15M	99334	H2010	X	1-20	60	X		X	X	X											24
666	99335 E/M BRDCAR EST EXPD 25M	99335	H2010	X	21-32	60	X		X	X	X											24
667	99336 E/MBRDCAR EST DETAIL 40M	99336	H2010	X	33-50	60	X		X	X	X											24
668	99337 E/M BRDCAR EST COMPX 60M	99337	H2010	X	51>	60	X		X	X	X											24
	MEDICATION																					
367	Medication Training & Support (non face/face)	H0034**	H0034			60	X		X	X	X											
369	Meds Mgmt by RN LVN Only	H2010**	H2010			60						X										
	TESTING																					
535	96111 EXT DEV TEST INTERP RPT	96111	H2015			30	X	X	X	X	X		X	X	X	X	X	X				
415	96101 PSYCH TESTING	96101	H2015			30	X	X	X	X	X		X	X	X	X	X	X				
417	96118 NEUROPSYCH TESTING	96118	H2015			30	X	X	X	X	X		X	X	X	X	X	X				
	Katie A																					

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557	INT HOME-BAS SRV KATIE A (IHBS)	H2015			57	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
577	INTEN CARE CORD KATIE A (ICC)	T1017			07	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
491***	90785 + INTERACTIVE COMPLEXITY	H2015			30	X	X	X	X	X		X	X	X	X	X	X			

*restricted to 1 every 3yrs

** not billable to Medicare

+ Add-On Code may not be used alone

*** 491 code can only be used with 323, 441, 442, 443, 456, 465, 467, 468, 565 ONLY

E & M codes for HOME, SNF and Brd Car have only one location code as noted on this table