

Guidelines for RBHAs and Providers: Billing Codes for the Non-Title XIX SMI Medication Benefit



The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) has established a limited benefit package for non-TXIX members with Serious Mental Illness (SMI). The covered services and recommended billing codes are outlined below. The full DBHS Covered Behavioral Health Services Guide can be found at http://www.azdhs.gov/bhs/FNLguide_v6.9.pdf.

Psychiatric Assessment (for newly enrolled Non-Title XIX SMI members or when a new or different medical professional assumes responsibility for treatment of the member)

- 90801** Psychiatric diagnostic interview examination. Telemed (GT modifier) available for this service. (Lay Description – The clinician interviews the patient in an initial diagnostic examination, which includes taking the patient’s history and assessing his/her mental status, as well as disposition. The psychiatrist may spend time communicating with family, friends, coworkers, or other sources as part of this examination and may even perform the diagnostic interview on the patient through other informative sources. Laboratory or other medical studies and their interpretation are also included).
- H0031** Mental health assessment, by non-physician. Telemed (GT modifier) available for this service. (Lay description – Mental health assessment is provided by someone other than a physician who is a trained staff member. The assessment identifies factors of mental illness, functional capacity, and gathers additional information used for the treatment of mental illness. Code usage limited to SMI determination evaluations.) Please reference Policy 3.10 regarding allowed frequency of service.
- 99201** Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: a problem focused history; a problem-focused examination; straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99202** Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem-focused history; an expanded problem-focused examination; straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99203** Office or other outpatient visit for the evaluation and management of new patient, which requires these 3 key components: a detailed history; a detailed examination; and, medical decision-making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are of moderate severity.

Physicians typically spend 30 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.

- 99204** Office or other outpatient visit for the evaluation and management of new patient, which requires these 3 key components: a comprehensive history; a comprehensive examination; and, medical decision-making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99205** Office or other outpatient visit for the evaluation and management of new patient, which requires these 3 key components: a comprehensive history; a comprehensive examination; and, medical decision-making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.

Psychiatric Follow-up Visits (for medication management)

- 99212** Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a problem-focused history; a problem-focused examination; straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99213** Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: an expanded problem-focused history; an expanded problem-focused examination; medical decision-making of low complexity. Counseling and coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99214** Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a detailed history; a detailed examination; medical decision-making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.
- 99215** Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a comprehensive history; a comprehensive examination; and medical decision-making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting

problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family. Telemed (GT modifier) available for this service.

- 90862** Pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy. Telemed (GT modifier) available for this service. (Lay Description – This code describes the psychiatric services of managing the patient’s medications, including the patient’s current use of the medicines, a medical review of the benefits and treatment progression, management of side effects, and review or change of prescription. This is pharmacologically related and involves only minimal medical psychotherapy.)
- 99354** Prolonged physician service in the office or other outpatient setting requiring direct (face-to-face) patient contact beyond the usual service; first hour. (List separately in addition to code for office or other outpatient evaluation and management service). Telemed (GT modifier) available for this service.
- 99355** Prolonged physician service in the office or other outpatient setting requiring direct (face-to-face) patient contact beyond the usual service; each additional 30 minutes (list separately in addition to code for prolonged physician service 99354). Telemed (GT modifier) available for this service.
- 99358** Prolonged evaluation and management service before and/or after direct (face-to-face) patient care (e.g., review of extensive records and tests, communication with other professionals and/or the patient/family); first hour (list separately in addition to code(s) for other physician service(s) and/or inpatient or outpatient evaluation and management service). Telemed (GT modifier) available for this service.
- 99359** Prolonged evaluation and management service before and/or after direct (face-to-face) patient care (e.g., review of extensive records and tests, communication with other professionals and/or the patient/family); each additional 30 minutes (list separately in addition to code for prolonged physician service 99358). Telemed (GT modifier) available for this service.
- 90853** Group psychotherapy (other than of a multiple-family group)
(Lay Description – The psychiatric treatment provider conducts psychotherapy for a group of several patients in one session.)

Medication Administration

96372 Therapeutic, prophylactic or diagnostic injection (specify substance or drug); subcutaneous or intramuscular.

J0515 Injection, Benzotropine Mesylate, per 1mg

J1200 Injection, Diphenhydramine HCL, up to 50 mg

J1630 Injection, Haloperidol, up to 5 mg

J1631 Injection, Haloperidol Decanoate, per 50 mg

J2680 Injection, Fluphenazine Decanoate, up to 25 mg

J3410 Injection, Hydroxyine HCL, up to 25 mg

H2010 HG Comprehensive Medication Services, per 15 minutes: Administration of prescribed opioid agonist drugs to a person *in the office setting* in order to reduce physical dependence on

heroin and other opiate narcotics. Providers must be AHCCCS registered as a Category of Services (COS) type 01 (Medicine).

H0020 HG Alcohol and/or Drug Services; Methadone Administration and/or Services (provision of the drug by a licensed program): Administration of prescribed opioid agonist drugs for a person *to take at home* in order to reduce physical dependence on heroin and other opiate narcotics. Providers must be AHCCCS registered as a Category of Services (COS) type 01 (Medicine).

Nursing Support (RN, LPN; assistance for prescribing medical professionals and medication administration)

T1002 RN Services, up to 15 minutes: Medical management services (including medication monitoring) related to the treatment of a behavioral health disorder. As allowed by the individual provider's scope of practice may include such activities as the measurement of vital signs, assessment and monitoring of physical/medical status, review of the effects and side effects of medications and administration of medications.

T1003 LPN Services, up to 15 minutes: Medical management services (including medication monitoring) related to the treatment of a behavioral health disorder. As allowed by the individual provider's scope of practice may include such activities as the measurement of vital signs, assessment and monitoring of physical/medical status, review of the effects and side effects of medications and administration of medications.

Telephone Contact (by prescribing medical professionals [MD, DO, NP, PA] staff)

99441 Telephone evaluation and management service provided by a physician to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days not leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion.

99442 Telephone evaluation and management service provided by a physician to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days not leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion.

99443 Telephone evaluation and management service provided by a physician to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days not leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion.

Laboratory Services

36415 Collection of venous blood by venipuncture

Medically necessary laboratory services as currently available in the ADHS/DBHS Covered Behavioral Health Services Guide (http://www.azdhs.gov/bhs/FNLguide_v6.9.pdf)