



Billing and Coding for Behavioral Health Treatment in Primary Care

Counseling Risk Factor Reduction and Behavior Change Intervention

- **Preventive Medicine**
99401, 99402, 99403, 99404 (Individual)
99411, 99412 (Group)
- **Behavior Change Interventions**
99406-99407 Smoking and tobacco use cessation counseling visit
99408-99409 Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention (SBI) services

Adaptive Behavior Services

- Address deficient adaptive behaviors, maladaptive behaviors, or other impaired functioning secondary to deficient adaptive or maladaptive behaviors (e.g., instruction-following, verbal and nonverbal communication, imitation, play and leisure, social interactions, self-care, daily living, personal safety)
- **97151, 97152** (Assessment)
- **97153-97158** (Treatment)

Behavioral and Developmental Screening

- **96127** Brief emotional/behavioral assessment (e.g., depression inventory, attention deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument
- **96110** Developmental screening (e.g., developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument
- **96161** Administration of caregiver-focused health risk assessment instrument (e.g., depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument

Health Behavior Assessment and Intervention

- Focus on psychological, behavioral, emotional, cognitive, and interpersonal factors, and factors complicating medical conditions and treatments
- **96156-96171** (Individual, Group, Family)

Care Management

- **99484** General Behavioral Health Integration Care Management
- **99492-99494 G2214** Psychiatric Collaborative Care Management

SBIRT Brief Intervention Codes, Billable by Multiple Licensed Providers (MD, RN, BH, etc)

99408 (Private)
G0396 (Medicare)
H0049 (Medicaid) } 15-30 minutes Full Screening and Brief Intervention for substance misuse

99409 (Private)
G0397 (Medicare)
H0050 (Medicaid) } 30+ minutes Full Screening and Brief Intervention for substance misuse

BHI/Collaborative Care Model Codes Billed Under The Treating Medical Provider

G2214 - 30 minutes in ANY month of Collaborative Care Model (CoCM) services

99492 - First 70 minutes in first calendar month of CoCM services

99493 - First 60 minutes in any subsequent calendar month of CoCM services

99494 - Each additional 30 minutes in any calendar month of CoCM services

99484 - A minimum of 20 minutes in one month for general BHI services

G Codes for FQHC/RHC Practices

G0512 - Minimum 70 minute initial month and 60 minute subsequent months of CoCM services

G0511 - 20 or more minutes/month of General Care Management, including activities previously billed as Chronic Care Management (99490 or 99487)

CPT Psychotherapy Codes for the Clinically Licensed BH Providers

90791 - Psychiatric evaluation without medical services

90832 - 16-37 minutes of psychotherapy with the patient

90834 - 38-52 minutes of psychotherapy with the patient

90837 - 53+ minutes of psychotherapy with the patient

90846 - 50 minutes of family therapy (without patient present)

90847 - 50 minutes of family therapy (with patient present)

90839 - Crisis Psychotherapy first 60 minutes with the patient

90853 - Group Therapy

Cognitive Assessment and Care Plan Services

- **99483**
- Cognitive Assessment and Care Plan Services Provided when a comprehensive evaluation of a new or existing patient, who exhibits signs and/or symptoms of cognitive impairment, is required to establish or confirm a diagnosis, etiology, and severity for the condition
- Thorough evaluation of medical and psychosocial factors, potentially contributing to increased morbidity

Office Based Treatment for SUD, Billed Under Treating Medical Provider

- **G2086** - First 70 minutes in the first calendar month of Office-Based Tx for SUD
- **G2087** - At least 60 minutes in any subsequent month of Office-based Tx for SUD
- **G2088** - Additional 30 minutes beyond the first 120 minutes in any month of Tx

CPT Psychotherapy Codes for the Psychiatric Providers

90792 - Psychiatric evaluation with medical services

99211-99215 - EM codes for follow up visits with medicine components

90833 - 16-37 minutes of individual psychotherapy

90836 - 38-52 minutes of individual psychotherapy

90838 - 53+ minutes of individual psychotherapy

90785 - Psychotherapy Complex Interactive (list separately in addition to code for primary procedure)

Inter-Professional Telephone/Internet/EHR Consultation for Consulting Psychiatrists

These codes may be billed when more than 50% of the time is spent in medical consultative discussion, either verbally or online, and a verbal and written report provided to the treating provider:

99446 (5-10 minutes); **99447** (11-20 minutes); **99448** (21-30 minutes); **99449** (31+ minutes)

BHI/Collaborative Care Model Codes Billed by Clinical Psychologist or CSW

G0323 - Care management services for behavioral health conditions - minimum 20 minutes per calendar month