



Provider Memorandum

April 2023

RE: Certified Community Behavioral Health Center (CCBHC) – Billing Notification

Claim Submission Instructions

Effective January 1, 2022, CCBHC services will be billed through all Medicaid delivery models to include Fee-for-Service (FFS) and Medicaid MCOs.

For each day in which services are provided to a recipient, the CCBHC will bill one unit of the Encounter Code, T1040 (Medicaid-certified community behavioral health clinic services, per diem), without a modifier, for that recipient. This code will be paid at the Prospective Payment System (PPS) rate that is specific to each individual CCBHC.

To identify the nature of the services rendered, the CCBHC must submit each appropriate Current Procedural Terminology (CPT) and/or Healthcare Common Procedure Coding System (HCPCS) code (from the CCBHC Allowable Services grid or the FQHC CCBHC Allowable Services grid – see the links below) on a separate claim line using the Q2 modifier. Each of those claim lines must have the charge and number of units indicated. Due to the variety of services and the need of identifying each service rendered, span dating is not permitted for this provider type.

Covered Services

The following links to the CCBHC Allowable Services grid and the FQHC CCBHC Allowable Services grid provide covered codes, code descriptions and billing information as needed. **Only the services listed on the Allowable Services grid are reimbursable for the CCBHC program.**

Please note that CCBHCs are only able to provide Partial Hospital Program (PHP) services if certified through the Substance Abuse Prevention and Treatment Agency (SAPTA) and are meeting the appropriate provider qualifications to provide a PHP program. For coverage and limitations, refer to [MSM Chapter 2700](#).

[Nevada CCBHC Allowable Services](#) (see attached document)

[Nevada FQHC/CCBHC Allowable Services](#) (see attached document)

**Nevada CCBHC Allowable Services
October 1, 2021**

The allowable services listed on this grid are intended to address the 9 core service areas as defined by SAMHSA and CMS for the **CCBHC Program**.
The services detailed here are for state certified CCBHCs Program under MSM Chapter 2700.
The services listed include Nevada State Medicaid covered services.

NOTE: Providers are required to bill each service actually rendered on that day on separate lines, attaching a Q2 modifier to each of those lines.

CPT or HCPCS Code*	DESCRIPTION
Crisis Intervention Services to include: 24 Hour Crisis Response with Crisis Intervention, Crisis Stabilization, and 24 hour Mobile Crisis Services	
Crisis Intervention	
H2011 H2011 GT/HT	Crisis Intervention, per 15 minutes,
H2011, 90839/90840, 90846/90847/ 90849	Intensive Family Intervention Services can be utilized with a combination of services: Crisis Intervention Services (H2011), Psychotherapy for Crisis (90839 and 90840), and Family Psychotherapy with or w/out the patient (90846, 90847 and 90849).
H0007	Alcohol and/or drug services; crisis intervention (outpatient)
Est. Patient 99211-99215, New Patient 99202-99205	Ambulatory Withdrawal Management is an outpatient detoxification that requires medication monitoring to either assist a recipient to detox by using medications or to assist in titrating down from medications. This requires a higher level of safety protocols to be put in place for monitoring and safety of the recipient. These codes would be best utilized through office visit codes (established 99211-99215 and new patient 99202-99205). Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Review 2021 CPT codes book for guidance and time requirements for each code.
Psychotherapy for Crisis/Crisis Stabilization	
90839	Psychotherapy for Crisis, first 60 mins
90840	Psychotherapy for Crisis, each additional 30 mins
24-Hour Mobile Crisis	
H2011 H2011 GT/HT	Crisis Intervention Service
Behavioral Health Screening, Assessment, and Diagnosis including Assessment of Risk	
Behavioral Health Screening	
H0002	Behavioral Health Screening to determine eligibility for admission to treatment program (1 unit per assessment at least 30 minutes)
H0049	Alcohol/drug screening (1 unit per screening)
96110	Developmental Screening
99408	Alcohol and/or Substance Abuse Screening, 15-30 minutes.
99409	Alcohol and/or Substance Abuse Screening, greater than 30 minutes
Interactive Complexity & Psychiatric Diagnostic Procedures	
90785	Interactive Complexity
90791	Psychiatric Diagnostic Evaluation
90792	Psychiatric Diagnostic Evaluation with Medical Services
Evaluation & Management-Physician, NP's, PA's.	
90833	Psychotherapy, 30 mins, with pt and/or family member when performed with an E/M service.
90836	Psychotherapy, 45 mins, with pt and/or family member when performed with an E/M service.
90838	Psychotherapy, 60 mins, with pt and/or family member when performed with an E/M service.
99202	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 15-29 mins face-to-face.
99203	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 30-44 mins face-to-face.
99204	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 45-59 mins face-to-face.
99205	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused examination, and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 60-74 mins face-to-face.
99211	Office or other outpatient visit for the E/M of an ESTABLISHED patient, that may not require the presence of a physician or other qualified healthcare professional. Usually, the presenting problems are minimal. Typically, 5 minutes are spent performing or supervising these services.

CPT or HCPCS Code*	DESCRIPTION
99212	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are self limited or minor. Typically, 10-19 minutes face-to-face.
99213	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are low to moderate severity. Typically, 20-29 minutes face-to-face.
99214	Office/outpatient visit est, 30-39 minutes
99215	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are of moderate to high severity. Typically, 40-54 minutes face-to-face.
99217	Observation care discharge day management
Psychological Assessment	
96130, 96131, 96132	Psychological Testing
96112, 96113	Developmental Screening
96132, 96133	Neuropsychological Testing
96156, 96158	Health Behavior Assessment
Behavioral Health Assessment	
H0031	Mental Health Assessment by Non-physician
H0001	Alcohol and/or Drug Assessment (1 unit per assessment at least 30 minutes)
96116	Neurobehavioral Status Exam
Patient-Centered Treatment Planning or Similar Processes Including Risk Assessment and Crisis Planning	
96130-96132, 96112-96113, 96132-96133	Treatment Planning is combined with behavioral health and/or psychological screens and assessments to determine the needed services for a recipient.
H2011 H2011 GT/HT	Crisis Intervention Service
H0007	Risk Assessment (Suicidality); Alcohol and/or drug services; crisis intervention (outpatient)
Outpatient Mental Health and Substance Abuse Treatment	
90832	Psychotherapy, 30 mins, with pt and/or family member
90834	Psychotherapy, 45 mins, with pt and/or family member
90837	Psychotherapy, 60 mins, with pt and/or family member
90846	Family Psychotherapy (without the patient present)
90847	Family Psychotherapy (conjoint therapy) (with patient present)
90849	Multiple-Family Group Psychotherapy
90853	Group Psychotherapy (other than of a multiple-family group)
90875, 90876, 90901	Biofeedback Training
90911	Biofeedback peri/uro/rectal
H0004	Behavioral Health Counseling; in home or community setting
H0004 HQ	Behavioral Health Counseling; in home or community setting; groups
H0035	Mental Health; Partial Hospitalization, treatment less than 24 hours (1 unit equals 60 minutes)
S9480	Intensive Outpatient Psychiatric Services, per diem
H0005	Alcohol and/or Drug Services; group counseling by a clinician (1 unit per group at least 30 minutes)
H0015	Alcohol and/or Drug Services; intensive outpatient program (3 hours per day at least 3 days per week) (1 unit equals 1 day/visit)
H0020	Alcohol and/or Drug Services; methadone administration and/or service (provision of the drug by a licensed program)
H0047	Alcohol and/or Drug Services; (State defined: individual counseling by a clinician). (1 unit per session at least 30 minutes)
96156-96159	Health Behavior Assessment
Medication Management	
H0034	Medication Training and Support; per 15 minutes
H0034 TD	Medication Training and Support; per 15 minutes; Registered Nurse QMHA

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CPT or HCPCS Code*	DESCRIPTION
96372	Therapeutic, prophylactic, or diagnostic injection; subcutaneous or intramuscular
Medication Assisted Treatment for Opioid Use Disorder (OUD) Services, attaching the U5 modifier to each of those lines	
99241-99245 U5	Office consultation for a new or established patient
99354-99355 U5	Prolonged evaluation and management or psychotherapy
Targeted Case Management	
T1016	Targeted Case Management for Non-SMI, Non-SED (Level I-II LOCUS/CASII), 15 minutes
T1016	Targeted Case Management Non-SED (Level I-II LOCUS/CASII), 15 minutes
T1017	Targeted Case Management-SED, 15 minutes
T1017	Targeted Case Management-SMI, 15 minutes
Outpatient Clinic Primary Care Screening and Monitoring of Key Indicators and Health Risk	
81000	Urinalysis nonauto w/scope
81001	Urinalysis auto w/scope
81002	Urinalysis nonauto w/o scope
81003	Urinalysis auto w/o scope
81015	Microscopic exam of urine
81025	Urine pregnancy test
82948	Reagent strip/blood glucose
82962	Glucose blood test
83026	Hemoglobin
83036	HgA1c
84702	Chorionic gonadotropin test
84703	Chorionic gonadotropin assay
86308	Heterophile antibody screen
86331	Immunodiffusion ouchterlony
86580	Tb intradermal test
86702	Hiv-2 antibody
87340	Hepatitis B surface AG IA
87341	Hepatitis B surface AG IA, neutralization
87800	Detect agnt mult dna direc
87880	Strep A assay w/optic
90471	Immunization admin
90472	Immunization admin each add
90473	Immune admin oral/nasal
90474	Immune admin oral/nasal addl
90690	Typhoid vaccine oral
90691	Typhoid vaccine im
90740	HepB vacc 3 dose immunup im
90747	HepB vacc 4 dose immunup im
90748	HIB-HEPB vaccine im
94010	Breathing capacity test, Spirometry
94060	Evaluation of wheezing
94150	Vital capacity test
94640	Airway inhalation treatment
96160	Health risk assessment test
99174	Amblyopia screening; Screening for amblyopia may be separately reimbursed along with an EPSDT screen.
99381	New patient, infant (age under 1 year)
99382	New patient, early childhood (age 1-4)
99383	New patient, late childhood (age 5-11)
99384	New patient, adolescent (age 12-17)

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CPT or HCPCS Code*	DESCRIPTION
99385	New patient, adult (age 18-39)
99391	Established patient, infant (under 1 year)
99392	Established patient, early childhood (age 1-4)
99393	Established patient, late childhood (age 5-11)
99394	Established patient, adolescent (age 12-17)
99395	Established patient, adult (age 18-39)
G0101	Cervical or vaginal cancer screening; pelvic and clinical breast exam
G0102	Prostate cancer; digital rectal exam
G0438	Annual Wellness Visit, including a personalized prevention plan of service, initial visit (21 & over)
G0439	Annual Wellness Visit, including a personalized prevention plan of service, subsequent visit (21 & over)
90460	Immunization Administration through 18 years of age; first vaccine/toxoid component (Bill at the usual and customary charge)
90471	Vaccine Administration – Single
90472	Vaccine Administration – Each Additional Unit
90476-90748	Vaccines (Bill the appropriate vaccine code at a zero dollar amount.) Providers must use Vaccines for Children (VFC) vaccines for children 18 and under.
90476	Vaccine for adenovirus oral admin, type 4
90477	Vaccine for adenovirus oral admin, type 7
96110	Developmental Screening
96127	Brief emotional/behavioral assessment (e.g., Depression inventory, ADHD) with scoring and documentation per standardized instrument
99188	Application of fluoride varnish by physician or other qualified health care professional
99401	Family Planning Service/Preventive medicine counseling
96161	Caregiver Health Risk Assessment, administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument.
80305	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures (eg, immunoassay); capable of being read by direct optical observation only (eg, dipsticks, cups, cards, cartridges) includes sample validation when performed, per date of service.
80306	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures (eg, immunoassay); capable of being read by instrument assisted direct optical observation (eg, dipsticks, cups, cards, cartridges) includes sample validation when performed, per date of service.
80307	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures, by instrument chemistry analyzers (eg, utilizing immunoassay, [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography, (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service.
G0445	Semiannual high intensity behavioral counseling to present STI's, individual, face to face, includes education skills training and guidance on how to change sexual behavior.
G0480	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 1-7 drug class(es), including metabolite(s) if performed.
G0481	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 8-14 drug class(es), including metabolite(s) if performed.
G0482	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 15-21 drug class(es), including metabolite(s) if performed.)
G0483	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomer's), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 22 or more drug class(es), including metabolite(s) if performed.
80047-80076	Organ or Disease-oriented panel (bill the appropriate code)
36415	Routine Venipuncture
86631	Chlamydia antibody
86632	Chlamydia iGm
86780	Analysis for Antibody, Treponema Pallidum (Syphilis Testing)
87110	Chlamydia culture any source
87270	Chlamydia antigen detection by immunofluorescent technique
87320	Chlamydia antigen detection by enzyme immunoassay technique
87801	Infectious agent detection by DNA or RNA, direct probe technique

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CPT or HCPCS Code*	DESCRIPTION
87810	Chlamydia antigen detection by immunoassay with direct optical observation
87590	Neisseria gonorrhoea, direct probe technique
87591	Neisseria gonorrhoea, amplified probe technique
87592	Neisseria gonorrhoea, quantification
87850	Neisseria gonorrhoea antigen detection by immunoassay with direct optical observation
86689	HIV antibody confirmatory test e.g. Western Blot
86701	HIV-1 antibody OR HIV-2 antibody
86703	HIV-1 & HIV-2 antibody
86592	Syphilis test, qualitative e.g. VDRL, RPR
86593	Syphilis test, quantitative e.g. VDRL, RPR
87623	Human Papillomavirus (HPV), low-risk types
87624	Human Papillomavirus (HPV), high-risk types
87625	Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed
80061	Cardiovascular disease screening - lipid panel
82465	Cardiovascular disease screening - cholesterol, serum or whole blood, total
83718	Cardiovascular disease screening - lipoprotein, direct measurement; high density cholesterol (hdl)
84478	Cardiovascular disease screening - triglycerides
82947	Diabetes screening tests - glucose; quantitative, blood (except reagent strip)
82950	Diabetes screening tests - glucose; post glucose dose
82951	Diabetes screening tests - glucose; tolerance test, three specimens
G0432	HIV screening; infectious agent antigen detection by immunoassay technique
G0433	HIV screening; infectious agent antigen detection by enzyme-linked immunosorbent assay
G0435	HIV screening; infectious agent antigen detection by rapid antibody test
Psychiatric Rehabilitation Services	
H2012	Behavioral Health Day Treatment (* Under an approved Model of Specialty 308), per hour
H2014	Basic Skills Training, per 15 minutes
H2014 HQ	Basic Skills Training Group
H2017	Psychosocial Rehabilitation - PSR could be utilized to assist with development of a wellness recovery action plan (WRAP) for coping with crisis scenarios. Per 15 minutes
H2017 HQ	Psychosocial Rehabilitation Group - PSR could be utilized to assist with development of a wellness recovery action plan (WRAP) for coping with crisis scenarios.
97165	Occupational Therapy Evaluation Low Complex 30 min
97166	Occupational Therapy Evaluation Moderate Complex 45 min
97167	Occupational Therapy Evaluation High Complex 60 min
97168	Occupational Therapy Re-evaluation Plan Care 30 min
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises
97112	Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation
97150	Therapeutic procedure(s), group (a group is 2 to 4 individuals.)
97530	Therapeutic activities, direct (one-to-one) patient contact by the provider (use of dynamic activities to improve the functional performance), each 15 minutes
97129	Therapeutic Interventions focus on cognitive function
97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-to-one) contact by the provider, each 15 minutes
97535	Self care/home management training (e.g., ADLs) direct (one-to-one) contact by the provider, each 15 minutes
97542	Wheelchair management/propulsion training, each 15 minutes
98961	Education and training for patient self-management by a Qualified, non physician health care professional using standardized curriculum, face-to-face with the patient (could include caregiver/family), each 30 min; individual
98962	Education and training for patient self-management by a Qualified, non physician health care professional using standardized curriculum, face-to-face with the patient (could include caregiver/family), each 30 min; 5-8 patients
Behavior Change Intervention & Counseling Risk Factors	
99401	Preventive med counseling
99406	Smoking and tobacco cessation counseling, greater than 3 minutes less than 15 minutes
99407	Smoking and tobacco cessation counseling, greater than 10 minutes
99490	Chronic disease self-management (disease intervention, self monitoring)

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CPT or HCPCS Code*	DESCRIPTION
G0108	Diabetes self-management; outpatient self-management training services, individual, per 30 minutes
G0109	Diabetes self-management; outpatient self-management training services, group session, per 30 minutes
H0038	Self-Help/Peer Service; per 15 minutes
H0038 HQ	Self-Help/Peer Service; per 15 minutes; Use modifier HQ when requesting/billing for a group setting
Place of Service: Providing services in the community and in non-traditional settings	
Q3014	Telehealth Originating site facility fee

Nevada FQHC/CCBHC Allowable Services

October 1, 2021

The allowable services listed on this grid are intended to address the 9 core service areas as defined by SAMHSA and CMS for the CCBHC Program.

The services detailed here are for the state certified CCBHC Program under MSM Chapter 2700.

The services highlighted in yellow are services that CCBHCs and FQHCs can both provide. In order to prevent duplicative billing for FQHCs that are dually certified as a CCBHC, please refer to the FQHC MSM Chapter 2900 and the CCBHC MSM Chapter 2700.

NOTE: Providers are required to bill each service actually rendered on that day on separate lines, attaching a Q2 modifier to each of those lines.

CPT or HCPCS Code*	DESCRIPTION
Crisis Intervention Services to include: 24 Hour Crisis Response with Crisis Intervention, Crisis Stabilization, and 24 hour Mobile Crisis Services	
Crisis Intervention	
H2011 H2011 GT/HT	Crisis Intervention, per 15 minutes,
H2011, 90839/90840, 90846/90847/ 90849	Intensive Family Intervention Services can be utilized with a combination of services: Crisis Intervention Services (H2011), Psychotherapy for Crisis (90839 and 90840), and Family Psychotherapy with or w/out the patient (90846, 90847 and 90849).
H0007	Alcohol and/or drug services; crisis intervention (outpatient)
Est. Patient 99211-99215, New Patient 99202-99205	Ambulatory Withdrawal Management is an outpatient detoxification that requires medication monitoring to either assist a recipient to detox by using medications or to assist in titrating down from medications. This requires a higher level of safety protocols to be put in place for monitoring and safety of the recipient. These codes would be best utilized through office visit codes (established 99211-99215 and new patient 99202-99205). Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Review 2021 CPT codes book for guidance and time requirements for each code.
Psychotherapy for Crisis/Crisis Stabilization	
90839	Psychotherapy for Crisis, first 60 mins
90840	Psychotherapy for Crisis, each additional 30 mins
24-Hour Mobile Crisis	
H2011 H2011 GT/HT	Crisis Intervention Service
Behavioral Health Screening, Assessment, and Diagnosis including Assessment of Risk	
Behavioral Health Screening	
H0002	Behavioral Health Screening to determine eligibility for admission to treatment program (1 unit per assessment at least 30 minutes)
H0049	Alcohol/drug screening (1 unit per screening)
99408	Alcohol and/or Substance Abuse Screening, 15-30 minutes
99409	Alcohol and/or Substance Abuse Screening, greater than 30 minutes
Interactive Complexity & Psychiatric Diagnostic Procedures	
90785	Interactive Complexity
90791	Psychiatric Diagnostic Evaluation
90792	Psychiatric Diagnostic Evaluation with Medical Services
Evaluation & Management-Physician, NP's, PA's.	
90833	Psychotherapy, 30 mins, with pt and/or family member when performed with an E/M service.
90836	Psychotherapy, 45 mins, with pt and/or family member when performed with an E/M service.
90838	Psychotherapy, 60 mins, with pt and/or family member when performed with an E/M service.
99202	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 15-29 mins face-to-face.
99203	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 30-44 mins face-to-face.
99204	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused exam, and medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 45-59 mins face-to-face.
99205	Office or other outpatient visit for the E/M of a NEW PT, which requires 3 components: a problem focused history, a problem focused examination, and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, 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. 60-74 mins face-to-face.
99211	Office or other outpatient visit for the E/M of an ESTABLISHED patient, that may not require the presence of a physician or other qualified healthcare professional. Usually, the presenting problems are minimal. Typically, 5 minutes are spent performing or supervising these services.

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CPT or HCPCS Code*	DESCRIPTION
99212	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are self limited or minor. Typically, 10-19 minutes face-to-face.
99213	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are low to moderate severity. Typically, 20-29 minutes face-to-face.
99214	Office/outpatient visit est, 30-39 minutes
99215	Office or other outpatient visit for the E/M of an ESTABLISHED patient, which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the patient's problem(s) and/or family's needs. Usually, problem(s) are of moderate to high severity. Typically, 40-54 minutes face-to-face.
99217	Observation care discharge day management
Psychological Assessment	
96130, 96131, 96132	Psychological Testing
96112, 96113	Developmental Screening
96132, 96133	Neuropsychological Testing
96156, 96158	Health Behavior Assessment
96161	Caregiver Health Risk Assessment, administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument.
Behavioral Health Assessment	
H0031	Mental Health Assessment by Non-physician
H0001	Alcohol and/or Drug Assessment (1 unit per assessment at least 30 minutes)
96116	Neurobehavioral Status Exam
Patient-Centered Treatment Planning or Similar Processes Including Risk Assessment and Crisis Planning	
96130-96132, 96112-96113, 96132-96133	Treatment Planning is combined with behavioral health and/or psychological screens and assessments to determine the needed services for a recipient.
H2011 H2011 GT/HT	Crisis Intervention Service
H0007	Risk Assessment (Suicidality); Alcohol and/or drug services; crisis intervention (outpatient)
Outpatient Mental Health and Substance Abuse Treatment	
90832	Psychotherapy, 30 mins, with pt and/or family member
90834	Psychotherapy, 45 mins, with pt and/or family member
90837	Psychotherapy, 60 mins, with pt and/or family member
90846	Family Psychotherapy (without the patient present)
90847	Family Psychotherapy (conjoint therapy) (with patient present)
90849	Multiple-Family Group Psychotherapy
90853	Group Psychotherapy (other than of a multiple-family group)
90875, 90876, 90901	Biofeedback Training
90911	Biofeedback peri/uro/rectal
H0004	Behavioral Health Counseling; in home or community setting
H0004 HQ	Behavioral Health Counseling; in home or community setting; groups
H0035	Mental Health; Partial Hospitalization, treatment less than 24 hours (1 unit equals 60 minutes)
S9480	Intensive Outpatient Psychiatric Services, per diem
H0005	Alcohol and/or Drug Services; group counseling by a clinician (1 unit per group at least 30 minutes)
H0015	Alcohol and/or Drug Services; intensive outpatient program (3 hours per day at least 3 days per week) (1 unit equals 1 day/visit)
H0020	Alcohol and/or Drug Services; methadone administration and/or service (provision of the drug by a licensed program)
H0047	Alcohol and/or Drug Services; (State defined: individual counseling by a clinician). (1 unit per session at least 30 minutes)
96156-96159	Health Behavior Assessment
Medication Management	
H0034	Medication Training and Support; per 15 minutes
H0034 TD	Medication Training and Support; per 15 minutes; Registered Nurse QMHA
96372	Therapeutic, prophylactic, or diagnostic injection; subcutaneous or intramuscular

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CPT or HCPCS Code*	DESCRIPTION
Medication Assisted Treatment for Opioid Use Disorder (OUD) Services, attaching the U5 modifier to each of those lines	
99241-99245 U5	Office consultation for a new or established patient
99354-99355 U5	Prolonged evaluation and management or psychotherapy
Targeted Case Management	
T1016	Targeted Case Management for Non-SMI, Non-SED (Level I-II LOCUS/CASII), 15 minutes
T1016	Targeted Case Management Non-SED (Level I-II LOCUS/CASII), 15 minutes
T1017	Targeted Case Management-SED, 15 minutes
T1017	Targeted Case Management-SMI, 15 minutes
Outpatient Clinic Primary Care Screening and Monitoring of Key Indicators and Health Risk	
96127	Brief emotional/behavioral assessment (e.g., Depression inventory, ADHD) with scoring and documentation per standardized instrument
80305	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures (eg, immunoassay); capable of being read by direct optical observation only (eg, dipsticks, cups, cards, cartridges) includes sample validation when performed, per date of service.
80306	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures (eg, immunoassay); capable of being read by instrument assisted direct optical observation (eg, dipsticks, cups, cards, cartridges) includes sample validation when performed, per date of service.
80307	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures, by instrument chemistry analyzers (eg, utilizing immunoassay, [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography, (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service.
G0480	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 1-7 drug class(es), including metabolite(s) if performed.
G0481	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 8-14 drug class(es), including metabolite(s) if performed.
G0482	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 15-21 drug class(es), including metabolite(s) if performed.)
G0483	Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomer's), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (eg, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)); qualitative or quantitative, all sources, includes specimen validity testing, per day, 22 or more drug class(es), including metabolite(s) if performed.
G0438	Annual Wellness Visit, including a personalized prevention plan of service, initial visit (21 & over)
G0439	Annual Wellness Visit, including a personalized prevention plan of service, subsequent visit (21 & over)
G0445	Semiannual high intensity behavioral counseling to present STI's, individual, face to face, includes education skills training and guidance on how to change sexual behavior.
80061	Cardiovascular disease screening - lipid panel
82465	Cardiovascular disease screening - cholesterol, serum or whole blood, total
83718	Cardiovascular disease screening - lipoprotein, direct measurement; high density cholesterol (hdl)
84478	Cardiovascular disease screening - triglycerides
86780	Analysis for Antibody, Treponema Pallidum (Syphilis Testing)
82947	Diabetes screening tests - glucose; quantitative, blood (except reagent strip)
82950	Diabetes screening tests - glucose; post glucose dose
82951	Diabetes screening tests - glucose; tolerance test, three specimens
Psychiatric Rehabilitation Services	
H2012	Behavioral Health Day Treatment (* Under an approved Model of Specialty 308), per hour
H2014	Basic Skills Training, per 15 minutes
H2014 HQ	Basic Skills Training Group
H2017	Psychosocial Rehabilitation - PSR could be utilized to assist with development of a wellness recovery action plan (WRAP) for coping with crisis scenarios.
H2017 HQ	Psychosocial Rehabilitation Group - PSR could be utilized to assist with development of a wellness recovery action plan (WRAP) for coping with crisis scenarios.
98961	Education and training for patient self-management by a Qualified, non physician health care professional using standardized curriculum, face-to-face with the patient (could include caregiver/family), each 30 min; individual

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CPT or HCPCS Code*	DESCRIPTION
98962	Education and training for patient self-management by a Qualified, non physician health care professional using standardized curriculum, face-to-face with the patient (could include caregiver/family), each 30 min; 5-8 patients
Behavior Change Intervention & Counseling Risk Factors	
96156-96159	Health Behavior Assessment
99401	Preventive med counseling
99406	Smoking and tobacco cessation counseling, greater than 3 minutes less than 15 minutes
99407	Smoking and tobacco cessation counseling, greater than 10 minutes
99420	Health risk assessment test
99490	Chronic disease self-management (disease intervention, self monitoring)
G0108	Diabetes self-management; outpatient self-management training services, individual, per 30 minutes
G0109	Diabetes self-management; outpatient self-management training services, group session, per 30 minutes
H0038	Self-Help/Peer Service; per 15 minutes
H0038 HQ	Self-Help/Peer Service; per 15 minutes; Use modifier HQ when requesting/billing for a group setting
Place of Service: Providing services in the community and in non-traditional settings	
Q3014	Telehealth Originating site facility fee