

## 2013 CPT Procedure Code Changes Every Behavioral Health Provider Should Know

The AMA's 2013 CPT procedural code book is arriving in offices this month, and with it comes big coding changes for prescribers and non-prescribers alike. On the psychiatric front, perhaps the most notable change is the elimination of the med-management code 90862. The 2013 CPT code book explicitly directs providers to report pharmacologic management in the absence of therapy with an evaluation and management (E/M) code. For the busy psychiatrist or group practice, knowing your plan for transition from using 90862 to the equivalent evaluation and management code will help ensure your revenue cycle does not suffer disruption. The 908XX psychiatric code series (90807 and 90817, for example) which covered therapy with medical management for prescribers has been eliminated. Again, prescribers are directed to report medical management including therapy with an appropriate E/M code and one of the new 2013, prescriber-only, psychotherapy add-on codes based on the time spent in therapy. E/M codes, a territory where some psychiatrists might once have feared to tread, will now be an integral part of the billing required in the course of the psychiatric practice.

Other changes for behavioral healthcare CPT coding include the elimination and replacement of therapy codes in the 908XX series used by non-prescribers. The new psychotherapy codes have specific times rather than time ranges attached to their descriptions, but will follow the 15 minute CPT time rule  $^{\sim}$  an important detail which will also require your investigation if you are not familiar with it. Historically, the time described in previous years was designated as face-to-face patient time. Time spent is now described as time spent with the patient and/or family/caregivers. 90801 has been eliminated and replaced with two initial psychiatric diagnostic codes, one for prescribers (90792) and an initial evaluation code specifically for non-prescribers (90791). A new add-on code has been created for interactive complexity, to be used in tandem with the new therapy codes as appropriate. All other interactive psychotherapy codes have been eliminated from the 2013 CPT codes. A completely new code series has been added for crisis psychotherapy, primarily intended for non-prescribers, based on 60 and 30 minute increments of time spent in crisis therapy.

Regardless of the size or scope of your practice, or the clinical setting in which you work, you will need to address and adjust the coding of your services in 2013. All behavioral healthcare providers or their administrative staff should obtain a copy of the AMA's 2013 CPT book and follow the guidelines established for their specialty's billing needs. As a first step for prescribers, you must become familiar with evaluation and management codes and the requirements inherent in using these codes, outside of the counseling and coordination of care allowance. Prescribers and non-prescribers will need to understand the distinctions in the new definitions of time, and how to determine the correct code if the time spent falls in between the designated descriptions. On the administrative side, we recommend that you make contact with all of your contracted payers immediately to determine their reimbursement rates for these new behavioral health CPT codes. If you are a prescriber, you should confirm at the same time that the inclusion of E/M codes and the reimbursement of E/M codes are part of your contract as a behavioral healthcare provider. If the reimbursement rates for E/M codes were not included in your original contract with a given payer, be certain to request that information as well. Making sure that your payer contracts are up to date is one needed step to address the question "How will 2013 CPT codes affect my psychiatric behavioral health practice?" The new 2013 CPT codes will bring changes that extend beyond the provider's office.



## **2013 CPT Code Changes**

	2012 CPT Codes	→ 2013 CPT Codes	
	Initial Psych	iatric Evaluation	
<b>90801</b> – Available	to everyone	90791 – Available to everyone	
		90792 – Prescribers only	
		Psychiatric Evaluation	
90802 – Available to everyone		<b>90791</b> + <b>90785</b> – Available to everyone	
	Madication	90792 + 90785 – Prescribers only	
<b>90862</b> – Prescribe		n Management Appropriate E/M code – Prescribers	s only
	•	thotherapy (when E/M cannot be bi	•
	erapy with Medication Management	90832, 90834, 90837	псиј
		+ 90863 – Prescribers only*	
	Outpatient	Psychotherapy	
20-30 minutes	90804 – Available to everyone	90832 – Available to everyone	30 minutes**
	,	,	
	90805 – Prescribers only	Appropriate E/M code	
		+ 90833 – Prescribers only	
45-50 minutes	90806 – Available to everyone	90834 – Available to everyone	45 minutes
	00007 Drasavihava anh	Appropriate F/84 code	
	90807 – Prescribers only	Appropriate E/M code + 90836 – Prescribers only	
75-80 minutes	90808 – Available to everyone	90837 – Available to everyone	60 minutes
75-60 IIIIIIutes	7. Valiable to everyone	7. Valiable to everyone	oo miiidees
	90809 – Prescribers only	Appropriate E/M code	
		+ 90838 – Prescribers only	
	-	atient Psychotherapy	
20-30 minutes	90810- Available to everyone	90832 – Available to everyone	30 minutes
		+90875 – Interactive complexity	
	90811 – Prescribers only	Appropriate E/M code	
	90011 - Frescribers only	+ 90833 – Prescribers only	
		+90875 – Interactive complexity	
45-50 minutes	90812 – Available to everyone	90834 – Available to everyone	45 minutes
	,	+90875 – Interactive complexity	
	90813 – Prescribers only	Appropriate E/M code	
		+ 90836 – Prescribers only	
7F 90 minutes	00014 Available to evenuene	+90875 – Interactive complexity	60 minutes
75-80 minutes	90814 – Available to everyone	90837 – Available to everyone +90875 – Interactive complexity	60 minutes
		interdetive complexity	
	90815 – Prescribers only	Appropriate E/M code	
		+ 90838 – Prescribers only	
		+90875 – Interactive complexity	
	•	erapy/Psychiatric Codes	
90857 – Interactive group psychotherapy		90853 – Available to everyone	
		+90875 – Interactive complexity	
No march #		Therapy	
No previous "psy	chotherapy for crisis" codes	<b>90839</b> – Available to everyone <b>+ 90840</b>	
		T 30040	



## **2013 CPT Code Changes**

	2012 CPT Codes	→ 2013 CPT Codes	
	•	Psychotherapy	1
20-30 minutes	90816 – Available to everyone	90832 – Available to everyone	30 minutes
	90817 – Prescribers only	Appropriate E/M code	
		+ 90833 – Prescribers only	
45-50 minutes	90818 – Available to everyone	90834 – Available to everyone	45 minutes
	90819 – Prescribers only	Appropriate E/M code	
	<b>'</b>	+ 90836 – Prescribers only	
60 minutes	90821 – Available to everyone	90837 – Available to everyone	60 minutes
	90822 – Prescribers only	Appropriate E/M code	
		+ 90838 – Prescribers only	
	Interactive Inpa	atient Psychotherapy	<u>.</u>
20-30 minutes	90823– Available to everyone	90832 – Available to everyone	30 minutes
		+90875 – Interactive complexity	
	90824 – Prescribers only	Appropriate E/M code	
		+ 90833 – Prescribers only	
		+90875 – Interactive complexity	
45-50 minutes	90826 – Available to everyone	90834 – Available to everyone	45 minutes
		+90875 – Interactive complexity	
	90827 – Prescribers only	Appropriate E/M code	
		+ 90836 - Prescribers only	
		+90875 – Interactive complexity	
75-80 minutes	90828 – Available to everyone	90837 – Available to everyone	60 minutes
		+90875 – Interactive complexity	
	90829 – Prescribers only	Appropriate E/M code	
		+ 90838 – Prescribers only	
		+90875 – Interactive complexity	

<sup>\*</sup> cannot be used if provider is permitted to bill E/M codes

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## About Vālant:

The Vālant EMR Suite encompasses the unique scheduling, clinical documentation and billing requirements of the behavioral health practitioner. Designed by a team of practicing psychiatrists and leading therapists, the system is used by more than 2,000 practitioners daily. To learn more about Vālant's system visit <a href="https://www.valantmed.com">www.valantmed.com</a>, or call 888.774.0532.

<sup>\*\*</sup> in 2013, the fifteen minute rule will apply for determining how to choose the appropriate code based on time spent, if the time spent falls outside of the exact time description.