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Provider Bulletin Number 671

CMHC Providers

Manual Updates

Revisions to the procedure codes in the *Community Mental Health Center Provider Manual* on the Kansas Medical Assistance Program (KMAP) Web site at <https://www.kmap-state-ks.us> have been made. Effective January 1, 2006, these codes were changed to comply with annual Healthcare Common Procedure Coding System updates. This notification is for documentation purposes.

The following codes were added:

90772	99307
96101	99308
96102	99309
96103	99310

The following codes were deleted:

90782	99263
96100	99311
99261	99312
99262	99313

See Appendix I of the manual for more details.

Information about the Kansas Medical Assistance Program as well as provider manuals and other publications are on the KMAP Web site at <https://www.kmap-state-ks.us>. For the changes resulting from this provider bulletin, please view the *Community Mental Health Center Provider Manual*, pages A-4 through A-9 and A-11 through A-13.

If you have any questions or need to request a paper copy of the bulletin, please contact the KMAP Customer Service Center at 1-800-933-6593 (in-state providers) or (785) 274-5990 between 7:30 a.m. and 5:30 p.m., Monday through Friday.

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99254	<p>Initial inpatient consultation for a new or established patient, which requires these three key components:</p> <ul style="list-style-type: none"> • a comprehensive history; • a comprehensive examination; and • medical decision making of moderate complexity. <p>Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99255	<p>Initial inpatient consultation for a new or established patient, which requires these three key components:</p> <ul style="list-style-type: none"> • a comprehensive history; • a comprehensive examination; and • medical decision making of high complexity. <p>Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 110 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99261	<p>Follow up inpatient consultation for an established patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • a problem focused interval history; • a problem focused examination; • medical decision making that is straightforward or of low complexity. <p>Usually, the patient is stable, recovering or improving. Physicians typically spend 10 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99262	<p>Follow up inpatient consultation for an established patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • an expanded problem focused interval history; • an expanded problem focused examination; • medical decision making of moderate complexity. <p>Usually, the patient is responding inadequately to therapy or has developed a minor complication. Physicians typically spend 20 minutes at the bedside and on the patient's hospital floor or unit.</p>

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99263	<p>Follow up inpatient consultation for an established patient which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • a detailed interval history; • a detailed examination; • medical decision making of high complexity. <p>Usually, the patient is unstable or has developed a significant new problem.</p> <p>Physicians typically spend 30 minutes at the bedside and on the patient's hospital floor or unit.</p>

Please Note: If case consultation is provided by either an ARNP or PA, their performing provider number must appear on the HCFA-1500 claim form.

COMMUNITY PSYCHIATRIC SUPPORTIVE TREATMENT

H0036 Community Psychiatric Supportive Treatment per 15 minutes

DIETITIAN SERVICES

KBH	97802	Medical Nutrition Therapy - Initial Assessment
KBH	97803	Medical Nutrition Therapy - Reassessment and Intervention

HOSPITAL CARE

99221 Initial hospital care, per day, for the evaluation and management of a patient which requires these three key components:

- a comprehensive history;
- a comprehensive examination; and
- medical decision making that is straightforward or of low complexity.

Usually, the problem(s) requiring admission are of low severity. Physicians typically spend 30 minutes at the bedside and on the patient's hospital floor or unit.

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99222	<p>Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components:</p> <ul style="list-style-type: none"> • a comprehensive history; • a comprehensive examination; and • medical decision making of moderate complexity. <p>Usually, the problem(s) requiring admission are of moderate severity. Physicians typically spend 50 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99223	<p>Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components:</p> <ul style="list-style-type: none"> • a comprehensive history; • a comprehensive examination; and • medical decision making of high complexity. <p>Usually, the problem(s) requiring admission are of high severity. Physicians typically spend 70 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99231	<p>Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • a problem focused interval history; • a problem focused examination; • medical decision make that is straightforward or of low complexity. <p>Usually, the patient is stable, recovering or improving. Physicians typically spend 15 minutes at the bedside and on the patient's hospital floor or unit.</p>
	99232	<p>Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • an expanded problem focused interval history; • an expanded problem focused examination; • medical decision making of moderate complexity. <p>Usually, the patient is responding inadequately to therapy or has developed a minor complication. Physicians typically spend 25 minutes at the bedside and on the patient's hospital floor or unit.</p>

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99233	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: <ul style="list-style-type: none"> • a detailed interval history; • a detailed examination; • medical decision making of high complexity. Usually, the patient is unstable or has developed a significant complication or a significant new problem. Physicians typically spend 35 minutes at the bedside and on the patient's hospital floor or unit.
	99238	Hospital discharge day management; 30 minutes or less
	99239	Hospital discharge day management; more than 30 minutes

Please Note: If hospital care is provided by either an ARNP or PA, their performing provider number must appear on the HCFA-1500 claim form.

INDIVIDUAL COMMUNITY SUPPORT

T1019HK	Personal care services, per 15 minutes not for an inpatient or resident of a hospital, nursing facility, ICF/MR, or IMD, part of the individualized plan of treatment, use modifier HK
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MEDICATION - ADMINISTRATION

Z2636	Prolixin Enanthate 25 mg (1 cc medication & injection)
J2680	Fluphenazine Decanoate up to 25 mg (1 cc med. & injection)
J1631	Haloperidol Decanoate 50mg (medication injection)
90772	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular
90782	Therapeutic or diagnostic injection (specify material injected); subcutaneous or intramuscular (patient supplies own medication)

MEDICATION - GROUP

S9446	Patient education, not otherwise classified, non-physician, group, per session
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MEDICATION - REVIEW

H2010	Comprehensive Medication Services, per 15 minutes (may bill 2/day)
90862	Pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy (by a physician or approved center staff, brief service).

~~* Service can be provided by either a CMHC or non-CMHC.~~

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
		<u>MENTAL HEALTH ATTENDANT CARE</u>
	T1019HE	Personal Care Services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR, part of the individualized plan of treatment, use HE modifier
		<u>PARTIAL HOSPITALIZATION</u>
	G0176	Activity therapy, such as music, dance, art or play therapies not for recreation related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)
	G0177	Training and education services related to the care and treatment of a patient's disabling mental health problems per session (45 minutes or more)
		<u>PERSONAL CARE SERVICE</u>
	T1019	Personal Care Service is one to-one-support and/or supervision for persons transitioning from an NFMH to community living
		<u>SCREENS FOR CONTINUED STAY IN AN NFMH</u>
	T2011	The annual screen for continued stay for individuals residing in a Nursing Facility for Mental Health (NFMH)
		<u>PSYCHIATRIC PREADMISSION ASSESSMENTS</u>
	T1023	Screening to determine the appropriateness of consideration of an individual for participation in a specific program, project, or treatment protocol, per encounter
	H0032	Mental health service plan development by non-physician
		<u>PSYCHOLOGICAL TESTING</u>
	96100	Psychological testing (includes psychodiagnostic assessment of personality, psychopathology, emotionality, intellectual abilities (e.g., WAIS R, Rorschach, MMPI) with interpretation and report, per hour
	96101	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality, and psychopathology, such as MMPI, RORSCHACH, WAIS), per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report
	96102	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality, and psychopathology, such as MMPI and WAIS), with qualified healthcare professional interpretation and report, administered by technician, per hour of technician time, face-to-face

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	96103	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality, and psychopathology, such as MMPI), administered by a computer, with qualified healthcare professional interpretation and report
		<u>PSYCHOSOCIAL TREATMENT GROUP</u>
	H2017	Adult Psychosocial Rehabilitation Group, per 15 minutes
	H2017Tj	Child and Adolescent Psychosocial Treatment Group 15 minutes
	H2017	Psychosocial Rehabilitation Group per 15 minutes
		<u>TARGETED CASE MANAGEMENT</u>
	T1017	Targeted case management per 15 minutes
		<u>THERAPY - FAMILY</u>
	90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
		<u>THERAPY - GROUP</u>
	90853	Group psychotherapy (other than of a multiple-family group)
	90853	Group therapy by approved center staff in free-standing psychiatric hospital (45-50 minutes).
		<u>THERAPY - INDIVIDUAL</u>
	90804	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient
	90805	with medical evaluation and management services
	90806	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 45 to 50 minutes face-to-face with the patient
	90807	with medical evaluation and management services
	90808	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 75 to 80 minutes face-to-face with the patient
	90809	with medical evaluation and management services
	<u>* Service can be provided by either a CMHC or non-CMHC.</u>	

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	90828	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms or non-verbal communication, in an inpatient hospital, partial hospital or residential care setting, approximately 75 to 80 minutes face-to-face with the patient
	90829	with medical evaluation and management services
	90816	Individual therapy by approved center staff in free-standing psychiatric hospital (20-30 minutes).

THERAPY - IN-HOME

S9484 Crisis Intervention

SUBSEQUENT NURSING FACILITY CARE

99307 Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:

- **Problem-focused interval history**
- **Problem-focused examination**
- **Straightforward medical decision making**

Counseling and/or coordination of care with other providers or agencies provided are consistent with the nature of the problem(s) and the patient's and/or family's needs.

Usually, the patient is stable, recovering, or improving.

99308 Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:

- **Expanded problem-focused interval history**
- **Expanded problem-focused examination**
- **Medical decision making of low complexity**

Counseling and/or coordination of care with other providers or agencies provided are consistent with the nature of the problem(s) and the patient's and/or family's needs.

Usually, the patient is responding inadequately to therapy or has developed a minor complication.

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99309	<p>Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • Detailed interval history • Detailed examination • Medical decision making of moderate complexity <p>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.</p> <p>Usually, the patient has developed a significant complication or a significant new problem.</p>
	99310	<p>Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • Comprehensive interval history • Comprehensive examination • Medical decision making of high complexity <p>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.</p> <p>The patient may be unstable or may have developed a significant new problem requiring immediate physician attention.</p>
	99311	<p>Subsequent nursing facility care, per day, for the evaluation and management of a new or established patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • a problem focused interval history; • a problem focused examination; • medical decision making that is straightforward or of low complexity. <p>Usually, the patient is stable, recovering or improving. Physicians typically spend 15 minutes at the bedside and on the patient's facility floor or unit.</p>

<u>COV.</u>	<u>PROCEDURE CODE</u>	<u>NOMENCLATURE</u> Updated 10/06
	99312	<p>Subsequent nursing facility care, per day, for the evaluation and management of a new or established patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • an expanded problem focused interval history; • an expanded problem focused examination; • medical decision making of moderate complexity. <p>Usually, the patient is responding inadequately to therapy or has developed a minor complication.</p> <p>Physicians typically spend 25 minutes at the bedside and on the patient's facility floor or unit.</p>
	99313	<p>Subsequent nursing facility care, per day, for the evaluation and management of a new or established patient, which requires at least two of these three key components:</p> <ul style="list-style-type: none"> • a detailed interval history; • a detailed examination; • a medical decision making of moderate to high complexity. <p>Usually, the patient has developed a significant complication or a significant new problem.</p> <p>Physicians typically spend 35 minutes at the bedside and on the patient's facility floor or unit.</p>

Please Note: If subsequent nursing facility care is provided by either an ARNP or PA, their performing provider number must appear on the HCFA-1500 claim form.