

Santa Clara County Behavioral Health Services
Assessment Codes

DMC-ODS Assessment Codes

CPT / HCPCS CODE	CODE SERVICE DESCRIPTION	CODE GUIDANCE AND USAGE	ALLOWABLE DISCIPLINES	DOCUMENTATION TIPS
90865	Narcosis for psychiatric diagnostic and therapeutic purposes, 15 minutes	Used for sodium amobarbital (Amytal) interview to monitor the effect of the drug	LP, PA, NP	<ul style="list-style-type: none"> • Patient's medical record must contain documentation that fully supports the medical necessity for the services provided • Document specific pharmacological agent, dosage administered and whether the technique was effective or non-effective • Documentation must include total time
90791	Psychiatric diagnostic evaluation, 15 minutes	The diagnostic interview exam is done when the provider first sees a patient. May be reported once per day and not on the same day as an E/M service performed by the same individual for the same patient.	LP, PA, Psy, LCSW, MFT, NP, LPCC	<ul style="list-style-type: none"> • Documentation must include a complete medical and psychiatric history, a mental status exam, ordering of laboratory and other diagnostic studies with interpretation, and communication with of sources or informants. • Documentation must include total time
90792	Psychiatric diagnostic evaluation with medical services, 15 minutes	Used for medical services provided in conjunction with the psychiatric diagnostic evaluation	LP, PA, NP	<ul style="list-style-type: none"> • Documentation must include a complete medical and psychiatric history, a mental status exam, ordering of laboratory and other diagnostic studies with interpretation, and communication with of sources or informants. • Documentation must include total time
90885	Psychiatric evaluation of hospital records and other accumulated data for medical diagnostic purposes, 15 minutes	Evaluation includes: hospital records, other psychiatric reports, psychometric and/or projective tests and other accumulated data May be separately reported on the same date of	LP, PA, Psy, LCSW, MFT, NP, LPCC	<ul style="list-style-type: none"> • Includes evaluation of results of psychometric tests or other evaluations. • Records can be from inpatient or outpatient hospitalization, drug or alcohol rehabilitation programs or facilities • Documentation must include total time

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		service as psychotherapy codes (90832-90838)		
96130 96131	Psychological testing evaluation	96130: 1 st hour 96131: each additional hour	LP, PA, Psy, NP	<ul style="list-style-type: none"> Document evaluation services, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the patient, family member(s) or caregiver(s), when performed Documentation must include total time of the evaluation
98966 98967 98968	Telephone assessment and management service	Used by a non-physician via telephone call. 98966: 5-10 minutes 98967: 11-20 minutes 98968: 21-30 minutes Code is not reported if phone call refers to a service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment	LP, Psy, LCSW, MFT, NP, LPCC	<ul style="list-style-type: none"> These calls involve obtaining a patient's history, assessing the patient's condition, medical decision making and communicating the decision via phone call with the patient Document the date, participant(s) on the call, notation that the phone call was patient-initiated, nature of the service and other pertinent information Document the assertion that the call was not related to a service performed and reported within previous 7 days Documentation must include total time of the phone call assessment
99202 99203 99204 99205	Office or Other Outpatient Visit , New Patient	99202: 15-29 minutes 99203: 30-44 minutes 99204: 45-59 minutes 99205: 60-74 minutes	LP, PA, NP	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99212 99213 99214 99215	Office or Other Outpatient Visit, Established Patient	99212: 10-19 minutes 99213: 20-29 minutes 99214: 30-29 minutes 99215: 40-54 minutes	LP, PA, NP	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99234 99235 99236	Observation or inpatient hospital care	99234: 45 minutes met or exceeded 99235: 70 minutes met or exceeded 99236: 85 minutes met or exceeded	LP, PA, NP	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter Includes admission and discharge on the same date

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99304 99305 99306	Initial nursing facility care per day for new or established patient	99304: 25 minutes met or exceeded 99305: 35 minutes met or exceeded 99306: 45 minutes met or exceeded	LP, PA, NP	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99307 99308 99309 99310	Subsequent nursing facility care per day for new or established patient	99307: 10 minutes met or exceeded 99308: 15 minutes met or exceeded 99309: 30 minutes met or exceeded 99310: 45 minutes met or exceeded	LP, PA, NP	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99341 99342 99344 99345	Home or residence visit, new patient	99341: 15 minutes met or exceeded 99342: 30 minutes met or exceeded 99344: 60 minutes met or exceeded 99345: 75 minutes met or exceeded	LP, PA, NP	<ul style="list-style-type: none"> Document specific place of home or residence visit Document total face-to-face (direct patient care) time on date of the encounter
99347 99348 99349 99350	Home or residence visit, established patient	99347: 20 minutes met or exceeded 99348: 30 minutes met or exceeded 99349: 40 minutes met or exceeded 99350: 60 minutes met or exceeded	LP, PA, NP	<ul style="list-style-type: none"> Document specific place of home or residence visit Document total face-to-face (direct patient care) time on date of the encounter
99441 99442 99443	Telephone evaluation and management services	99441: 5-10 minutes 99442: 11-20 minutes 99443: 21-30 minutes Used by physician or QHP for medical discussion via telephone call	LP, PA, NP	<ul style="list-style-type: none"> These calls involve obtaining a patient's history, assessing the patient's condition, medical decision making and communicating the decision via phone call with the patient Document the date, participant(s) on the call, notation that the phone call was patient-initiated, nature of the service and other pertinent information Document the assertion that the call was not related to a service performed and reported within previous 7 days

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		Code is not reported if phone call refers to a service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment		<ul style="list-style-type: none"> Documentation must include total time of the phone call assessment
H0001	Alcohol and/or Drug Assessment	<p>Time spent completing drug and/or alcohol assessments with patients in the course of treatment</p> <p>Determines appropriate delivery system for patient seeking services</p>	LP, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	<ul style="list-style-type: none"> Document why the assessment is being completed and preliminary findings or observations of the client's behaviors during the assessment process. Note involvement of family or other collaterals included. It is not acceptable to simply note that an assessment was completed Staff should only provide and document assessment services within their scope of practice One assessment equals one unit of service, regardless of length of time or if it takes multiple sessions to complete the initial assessment Document the course of treatment recommended
H0003	Alcohol and/or Drug Screening	Laboratory analysis of specimens for presence of alcohol and/or drugs	LP, PA, Psy, RN, NP, Pharma	<ul style="list-style-type: none"> Documentation of order(s) for the screening, including symptom or diagnosis to support medical necessity
H0048	Alcohol and/or other drug testing	Used for collection and handling only, specimens other than blood	LP, PA, RN, NP, Pharma	<ul style="list-style-type: none"> Document collection and specimen type, other than blood
H0049	Alcohol and/or Drug Screening	Miscellaneous drug and alcohol services	LP, Pharma, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	<ul style="list-style-type: none"> Documentation of order(s) for screening Tool and scoring must be recorded in record Valid brief questionnaire for screening that includes questions about the frequency and amount of alcohol/drugs used
G2011	Alcohol and/or substance (other than tobacco) abuse structured	Use codes G2011, G0396 and G0397 to determine the ASAM criteria	LP, Pharma, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	<ul style="list-style-type: none"> Used for reporting of alcohol and substance abuse assessment and intervention services that are not provided as screening services, but are performed in the context of the diagnosis or treatment of an illness

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	assessment, 5-14 minutes			<ul style="list-style-type: none"> Do not report separately with an E/M, psychiatric diagnostic, or psychotherapy service code for the same work/time. Use of this code is for 5-14 minutes of treatment and start/stop or total time must be documented.
G0396	Alcohol and/or substance misuse structured assessment and brief intervention 15 to 30 minutes	Use codes G2011, G0396, and G0397 to determine the ASAM criteria	LP, Pharma, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	<ul style="list-style-type: none"> Used for reporting of alcohol and substance abuse assessment and intervention services that are not provided as screening services, but are performed in the context of the diagnosis or treatment of an illness Do not report separately with an E/M, psychiatric diagnostic, or psychotherapy service code for the same work/time. Use of this code is limited to 30 minutes of treatment and start/stop or total time must be documented. If greater than 30 minutes, see G0397. If an intervention is not required on the basis of screening results the work effort is included in E/M or preventative service.
G0397	Alcohol and/or substance abuse structured assessment, 30+ minutes	Use codes G2011, G0396, and G0397 to determine the ASAM criteria	LP, Pharma, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	<ul style="list-style-type: none"> Used for reporting of alcohol and substance abuse assessment and intervention services that are not provided as screening services, but are performed in the context of the diagnosis or treatment of an illness Do not report separately with an E/M, psychiatric diagnostic, or psychotherapy service code for the same work/time. Use of this code is for more than 30 minutes of treatment and start/stop or total time must be documented. If less than 30 minutes, see G0396.