

Santa Clara County Behavioral Health Services  
Supplemental Services Codes

**SMHS Supplemental Services Codes**

CPT / HCPCS CODE	CODE SERVICE DESCRIPTION	CODE GUIDANCE AND USAGE	ALLOWABLE DISCIPLINES	DOCUMENTATION TIPS
90785	Interactive complexity	<p>Add on code reported in conjunction with an appropriate primary service for psychiatric diagnostic evaluation or psychotherapy service</p> <p>Used for situations beyond simply standard verbal communication</p> <p>Common factors include more difficult communication with discordant or emotional family members and engagement of young and verbally undeveloped or impaired patients. Typical patients are those who have third parties involved in their psychiatric care.</p>	MD/DO, PhD/PsyD, LCSW, PCC, MFT, PA, NP, CNS, Pharm, RN, LVN, OT, MHRS, Peer, LPT, Other	<p>Document at least one of the following:</p> <ul style="list-style-type: none"> <li>• Need to manage maladaptive communication (related to, eg, high anxiety, high reactivity, repeated questions, or disagreement) among participants that complicates delivery of care</li> <li>• Caregiver emotions or behavior that interferes with the caregiver's understanding and ability to assist in the implementation of the treatment plan</li> <li>• Evidence of disclosure of a sentinel event and mandated report to third party (eg, abuse or neglect with report to state agency) with initiation of discussion of the sentinel event and/or report with patient and other visit participants</li> <li>• Use of play equipment or other physical devices to communicate with the patient to overcome barriers to therapeutic or diagnostic interaction between the provider and a patient who has not developed, or has lost, either the expressive language communication skills to explain his/her symptoms and response to treatment, or the receptive communication skills to understand the provider if he/she were to use typical language for communication</li> </ul>
90887	Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to	Explanation of results to family or others involved in support of the patient, such as employers, in order to obtain their	MD/DO, PhD/PsyD, Pharm, LCSW, PCC, MFT, PA, NP, CNS, OT	<ul style="list-style-type: none"> <li>• Document the specific results or other accumulated data utilized in explanation to family or others</li> <li>• Include a narrative indicating there was another individual in addition to the physician and patient present at the time of this service</li> </ul>

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	family or other responsible persons, or advising them how to assist patient	permission, participation and/or support for the patient's treatment. Supplemental codes cannot be billed independently. They have to be billed with a/another (primary) procedure.		
96161	Caregiver assessment administration of caregiver focused risk assessment, 15 minutes	<p>Health and behavior assessment (eg, depression inventory) of the patient's caregiver for the benefit of the patient</p> <p>Code is related only to practice expense, including clinical staff work, supplies and equipment expenses</p> <p>Code does not include physician work that is separately reported with an E/M service</p>	MD/DO, PhD/ PsyD, Pharm, LCSW, PCC, MFT, PA, NP, CNS, OT, RN, LVN	<ul style="list-style-type: none"> <li>• Document results from the standardized assessment</li> <li>• Document score per standardized scorable instrument</li> <li>• Time documentation for the use of this code is <u>each 15 minutes</u>. Specific documentation of time must be included.</li> </ul>
T1013	Sign language or oral interpretive services, 15 minutes	Facilitate effective communication with deaf or hearing-impaired patients	MD/DO, PhD/PsyD, LCSW, PCC, MFT, PA, NP, CNS, Pharm, RN, LVN, OT, MHRS, Peer, LPT, Other	<ul style="list-style-type: none"> <li>• Time documentation for the use of this code is <u>each 15 minutes</u>. Specific documentation of time must be included.</li> </ul>