

Santa Clara County Behavioral Health Services
Therapy Codes

SMHS Therapy Codes

CPT / HCPCS CODE	CODE SERVICE DESCRIPTION	CODE GUIDANCE AND USAGE	ALLOWABLE DISCIPLINES	DOCUMENTATION TIPS
90832 90834 90837	Psychotherapy with patient	90832: 30 minutes 90834: 45 minutes 90837: 60 minutes Represents insight oriented, behavior modifying, supportive and/or interactive psychotherapy Report 90833 if a separate E/M service is performed during the same encounter	MD/DO, PA, PhD/PsyD, LCSW, MFT, NP, CNS, PCC	Documentation should include, but is not limited to the following: <ul style="list-style-type: none"> • Modalities and frequency • Clinical notes for each encounter that summarizes the diagnosis, symptoms, functional status, focused MSE, treatment plan, prognosis and progress • Face-to-face service that may include involvement of family members, patient must be present for all or some of the time • Documentation must include total time of psychotherapy
90833 90836 90838	Psychotherapy, with patient when performed with an evaluation and management service	90833: 30 minutes 90836: 45 minutes 90838: 60 minutes Represents insight oriented, behavior modifying, supportive and/or interactive psychotherapy	MD/DO, PA, NP, CNS	Documentation should include, but is not limited to the following: <ul style="list-style-type: none"> • Modalities and frequency • Clinical notes for each encounter that summarizes the diagnosis, symptoms, functional status, focused MSE, treatment plan, prognosis and progress • Face-to-face service that may include involvement of family members, patient must be present for all or some of the time • Documentation must include total time of psychotherapy • Documentation must support a separately identifiable E/M service with total time of the E/M service documented
90845	Psychoanalysis, 15 minutes	Includes follow-up work of documentation, content review and peer consultation	MD/DO, PA, PhD/PsyD, LCSW, MFT, NP, CNS, PCC	<ul style="list-style-type: none"> • Document the indication for psychoanalysis • Documentation must include total time of psychoanalysis
90847	Family psychotherapy	May be used on the same day as an individual psychotherapy	MD/DO, PA, PhD/PsyD,	<ul style="list-style-type: none"> • Session is for 50 minutes; time range is 26 minutes or more

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	(conjoint psychotherapy) (with patient present), 50 minutes	service when the services are separate and distinct for the patient	LCSW, MFT, NP, CNS, PCC	<ul style="list-style-type: none"> Documentation must include total time of psychotherapy
90849	Multiple-family, group psychotherapy, 15 minutes	Therapy sessions typically last between 1-2 hours. 90849 should be reported separately for each family group participating.	MD/DO, PA, PhD/PsyD, LCSW, MFT, NP, CNS, PCC	<ul style="list-style-type: none"> Involves working with families that have a member who has similar developmental or mental disorders Treatment is focused on the family unit, rather than on the individual Documentation must include total time of psychotherapy
90853	Group psychotherapy, 15 minutes	Does <u>not</u> include a multiple-family group	MD/DO, PA, PhD/PsyD, LCSW, MFT, NP, CNS, PCC	<ul style="list-style-type: none"> Involves working in a group setting that may include several patients Documentation must include total time of group psychotherapy
90867	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial	Includes cortical mapping, motor threshold determination, delivery and management Report only once per course of treatment	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document medical necessity for TMS treatment, including the symptom or diagnosis Documentation must include total time of TMS treatment
90868	Subsequent delivery and management of TMS, per session	Includes cortical mapping, motor threshold determination, delivery and management	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document medical necessity for TMS treatment, including the symptom or diagnosis Documentation must include total time of TMS treatment
90869	TMS treatment subsequent motor threshold re-determination with delivery and management	Includes cortical mapping, motor threshold re-determination, delivery and management	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document medical necessity for TMS treatment, including the symptom or diagnosis Documentation must include total time of TMS treatment
90870	Electroconvulsive therapy	Includes necessary monitoring	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document medical necessity for electroconvulsive therapy, including the symptom or diagnosis
90880	Hypnotherapy	Used as a modality for psychotherapy	MD/DO, PA, PhD/PsyD, LCSW, MFT,	<ul style="list-style-type: none"> Document medical necessity for hypnotherapy, including the symptom or diagnosis

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			NP, CNS, PCC	
99221 99222 99223	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient.	99221: 40 minutes met or exceeded 99222: 55 minutes met or exceeded 99223: 75 minutes met or exceeded	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99231 99232 99233	Subsequent hospital inpatient or observation care, per day, for the evaluation and management of a patient.	99231: 25 minutes met or exceeded 99232: 35 minutes met or exceeded 99233: 50 minutes met or exceeded	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99242 99243 99244 99245	Office or other outpatient consultation for a new or established patient.	99242: 20 minutes met or exceeded 99243: 30 minutes met or exceeded 99244: 40 minutes met or exceeded 99245: 55 minutes met or exceeded	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99252 99253 99254 99255	Inpatient or observation consultation for a new or established patient.	99252: 35 minutes met or exceeded 99253: 45 minutes met or exceeded 99254: 60 minutes met or exceeded 99255: 80 minutes met or exceeded	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter
99304 99305 99306	Initial nursing facility care, per day, for a new or established patient.	99304: 25 minutes met or exceeded 99305: 35 minutes met or exceeded 99306: 45 minutes met or exceeded	MD/DO, PA, NP, CNS	<ul style="list-style-type: none"> Document total face-to-face (direct patient care) time on date of the encounter

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<p>99307 99308 99309 99310</p>	<p>Subsequent nursing facility care, per day, for a new or established patient.</p>	<p>99307: 10 minutes met or exceeded 99308: 15 minutes met or exceeded 99309: 30 minutes met or exceeded 99310: 45 minutes met or exceeded</p>	<p>MD/DO, PA, NP, CNS</p>	<ul style="list-style-type: none"> • Document total face-to-face (direct patient care) time on date of the encounter
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