



SPECIALITY MENTAL HEALTH SERVICES (SMHS) AOA, CYF & TAY CPT and HCPCS CODES TIP SHEET FOR LPHA, MHRS, and QHPs 7/03/24 UPDATES (**Revised 08/08/24**)

All BHS Providers must use the appropriate CPT and/or HCPCS code(s) to charge for Specialty Mental Health Services (SMHS). BHS Providers are responsible for understanding the codes, the appropriate unit definition, adding the appropriate modifiers, training staff, and maintaining up to date information.

IMPORTANT CHANGES STARTING JULY 1, 2024

- Psychiatric diagnostic evaluation (**90791**) is now 60 minutes in duration. You must use T2024 to extend services over 68 minutes. See details below.
- G2212 is no longer available. You must now choose the appropriate add-on codes for prolonged services. See details below.
- Family psychotherapy [conjoint psychotherapy] (with patient present) (**90847**) is now 50 minutes in duration. For direct service time of 58 minutes or more, enter 1 unit of 90847 and the appropriate number of units of **T2021 (Therapy substitute)**. See details below.
- Multiple-family group psychotherapy (**90849**) is now 84 minutes in duration. For direct service time of 92 minutes or more, enter 1 unit of 90849 and the appropriate number of units of **T2021 (Therapy substitute)**. See details below.

Important Reminders for Epic:

- Direct Patient Care is billable time and **ONLY INCLUDES** time spent on direct patient care activities.
- Direct Patient Care will be a text field labeled “Direct Service Time” in Epic.
- All BHS providers must ensure that the direct service minutes on each Progress Note supports the units for each service charged. The following fields should align for all charges:
 - o Progress Notes: There is a Direct Service Time field in Epic at the end of each Progress Note. Providers will enter the time in minutes for each service being documented on the note. The duration of time per service is required for all Specialty Mental Health Services (SMHS).
 - o Charge Capture Units: The Charge Capture section indicates the number of units for each service being charged. The number of units selected for each charge must align with the Direct Service Time minutes on the corresponding note.
- Most codes should be selected based on the “midpoint rule” meaning that a unit associated with a code is attained when the mid-point is passed. For example, if one unit of a code is one hour, one unit of that code is attained when 31 minutes of direct patient care has been provided.
 - o Note that some codes, such as the Psychotherapy codes, have defined time ranges and are not subject to the midpoint rule. When claiming these codes, when a provider delivered the lower bound of the service indicated in the range, they can claim one unit of that code.
- The tables below highlight some of the most commonly used Specialty Mental Health (SMHS) CPT and HCPCS codes used by LPHAs, MHRS and QHPs.
 - o **There are additional codes available to bill.** Further information can be found on the most recent version of the Provider Crosswalk found on [Provider Billing Website](#).



	DHCS Direct Patient Care
INCLUDES	If the service code billed is a patient care code, Direct Patient Care means time spent with the patient for the purpose of providing healthcare. If the service code billed is a medical consultation code, then Direct Patient Care means time spent with the consultant/members of the beneficiary's care team.
DOES NOT INCLUDE	Direct Patient Care does not include travel time, administrative activities, chart review, documentation/writing, preparation time, utilization review and quality assurance activities or other activities a provider engages in either before or after a client visit.

Example:

A LPHA spends 75 minutes with a client to gather psychosocial mental health assessment information for diagnostic purposes, the provider completes the following steps to ensure accurate billing:

- i. **Progress Note:** Enter 75 minutes in the Direct Service Time field at the end of the MH Progress Note in Epic.
- ii. **Charge Capture:**
 - Select **Psychiatric Diagnostic Evaluation, 60 Min**
 - Quantity defaults to 1 unit in Epic
 - Select **T2024 (15 minutes, Assessment Substitute)**
 - Quantity defaults to 1 unit in Epic



Most Frequently Used CPT Codes for Behavioral Health

Allowable Disciplines for CPT Codes: CNS, CNS-CT, LCSW, LCSW-CT, LMFT, LMFT-CT, LPCC, LPCC-CT, MD/DO, MD/DO-Clerks, NP, NP-CT, PA, PhD-CT/PsyD-CT, PhD/PsyD

CPT Code	Service Description	Min Time to Charge 1 Unit	Max Time to Charge 1 Unit	Maximum Units That Can Be Charged Per Day	Can This Code Be Extended with an Add-on or Prolonged Code in Epic?	Appropriate Add-On Code and Examples of Unit/Duration Breakdown (Based on Total Direct Service Time)
90791	Psychiatric Diagnostic Evaluation, 60 Min	31 Min	67 Min	1	Yes. For direct service time of 68 minutes or more, enter 1 unit of 90791 and the appropriate number of units of T2024 (Assessment substitute).	T2024 1 Unit = 68–82min 2 Unit = 83–97min 3 Unit = 98–112min 4 Unit = 113–127min 5 Unit = 128–142min
90885	Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes, 60 Min	31 Min	67 Min	1	Yes. For direct service time of 68 minutes or more, enter 1 unit of 90885 and the appropriate number of units of T2024 (Assessment substitute).	T2024 1 Unit = 68–82min 2 Unit = 83–97min 3 Unit = 98–112min 4 Unit = 113–127min 5 Unit = 128–142min
90839	Psychotherapy for Crisis, First Hour	30 Min	74 Min	1	Yes. For services 75 minutes or more, claim add-on code 90840.	90840 1 Unit = 75–104min 2 Unit = 105–134min 3 Unit = 135–164min 4 Unit = 165–194min 5 Unit = 195–224min 6 Unit = 225–254min 7 Unit = 255–284min 8 Unit = 285–314min 9 Unit = 315–344min



90832	Psychotherapy, 30 Min with patient	16 Min	37 Min	1	No. See the next code in this series for direct service time exceeding the maximum time for this code.	N/A
90834	Psychotherapy, 45 Min with patient	38 Min	52 Min	1	No. See the next code in this series for direct service time exceeding the maximum time for this code.	N/A
90837	Psychotherapy, 60 Min with patient	53 Min	67 Min	1	Yes. For direct service time of 68 minutes or more, enter 1 unit of 90837 and the appropriate number of units of T2021 (Therapy substitute).	T2021 1 Unit = 68-82min 2 Unit = 83-97min 3 Unit = 98-112min 4 Unit = 113-127min 5 Unit = 128-142min
90847	Family Psychotherapy [conjoint psychotherapy], (with patient present), 50 Min	26 Min	57 Min	1	Yes. For direct service time of 58 minutes or more, enter 1 unit of 90847 and the appropriate number of units of T2021 (Therapy substitute).	T2021 1 Unit = 58-67min 2 Unit = 68-82min 3 Unit = 83-97min 4 Unit = 98-112min 5 Unit = 113-127min
90849	Multiple-Family Group Psychotherapy, 84 Min	43 Min	91 Min	1	Yes. For direct service time of 92 minutes or more, enter 1 unit of 90849 and the appropriate number of units of T2021 (Therapy substitute).	T2021 1 Unit = 92-97min 2 Unit = 98-112min 3 Unit = 113-127min 4 Unit = 128-142min 5 Unit = 143-157min



90853	Group Psychotherapy (other than of a multiple-family group), 50 Min	23 Min	57 Min	1	Yes. For direct service time of 58 minutes or more, enter 1 unit of 90853 and the appropriate number of units of T2021 (Therapy substitute).	T2021 1 Unit = 58-67min 2 Unit = 68-82min 3 Unit = 83-97min 4 Unit = 98-112min 5 Unit = 113-127min
90785	Interactive Complexity. There is no assigned time for this code.	Variable. This code is claimable when at least 1 unit of the primary procedure is claimed.	N/A	1 per allowed procedure	No. This code cannot be extended.	N/A
90887	Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient, 50 min	26 Min	50 Min	1	No. This code cannot be extended.	N/A



Most Frequently Used HCPCs Codes for Behavioral Health

Allowable Disciplines: **All Disciplines** may use these codes

HCPCs Code	Service Description	Min Time to Charge 1 Unit	Max Time to Charge 1 Unit	Maximum Units That Can Be Charged Per Day	Can This Code Be Extended with an Add-on or Prolonged Code in Epic?	Appropriate Add-On Code and Examples of Unit/Duration Breakdown (Based on Total Direct Service Time)
H0031	Mental Health Assessment by Non-Physician, 15 Min	8 Min	22 Min	96	No. Claim multiple units of this code as appropriate up to the maximum units per day.	1 Unit = 8-22min 2 Unit = 23-37min 3 Unit = 38-52min 4 Unit = 53-67min 5 Unit = 68-82min 6 Unit = 83-97min 7 Unit = 98-112min 8 Unit = 128-142min 9 Unit = 143-157min 10 Unit = 158-172min
H0032	Mental Health Service Plan Developed by Non-Physicians, 15 min	8 Min	22 Min	96	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above
T1017	Targeted Case Management, 15 min	8 Min	22 Min	96	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above
H2017	Psychosocial Rehabilitation, 15 Min	8 Min	22 Min	96	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above
H2017 - HQ	Psychosocial Group Rehabilitation, per 15 Min	8 Min	22 Min	96	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above
H2011 without Place of Service	Crisis Intervention Service, 15 Min	8 Min	22 Min	32	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above



H0034	Medication training and support, 15 Min	8 Min	22 Min	16	No. Claim multiple units of this code as appropriate up to the maximum units per day.	See above
T1013	Sign Language or Oral Interpretive Services, 15 Min	Variable	N/A	Variable, dependent on codes billed.	No. Claim multiple units of this code as appropriate. Interpretation time may not exceed the time spent providing a primary service.	See above

Reminder: Add-On Services Codes are not used with HCPCs codes

References:

[DHCS SMHS Billing Manual May 2024](#)

[SFDPH BHS CalAIM Payment Reform FAQ](#)

[Epic Operational Guide for BHS Providers](#)