

Behavioral Health Coding Guidelines

According to a Milliman study, individuals with mental and behavioral health conditions account for 57% of all health-care costs and expenditures. **Coding to the highest specificity provides insight into your patients' overall health and better predicts their medical risk score.**

NEBRASKA
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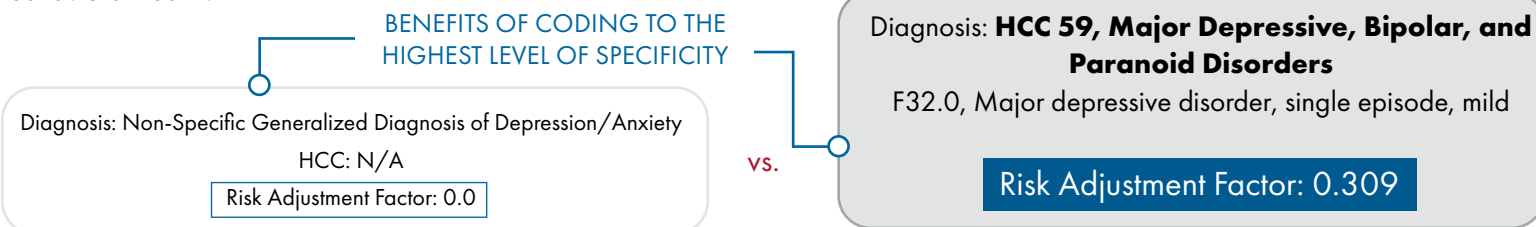
CODING GUIDELINES FOR PRIMARY CARE PROVIDERS

Some of the most common behavioral health codes used in the primary care setting include:

CODES	E/M BEHAVIORAL HEALTH
99401-99404	Individual, used for preventative counseling codes
99406 and 99407	Smoking and tobacco cessation counseling visit
99408 and 99409	Alcohol and/or substance abuse (brief intervention)
99483	Cognitive assessment/care plan

CODING GUIDELINES FOR TELEHEALTH VISITS

Many payers accept telehealth coding for medical risk adjustment. Coding to the highest level of specificity is even more important in behavioral health.



TIPS

- Follow the telehealth guideline rules that each insurance plan provides
- Apply Modifier 95 when billing a telemedicine service
- Document start and end of telehealth visit
- Document if telehealth visit was only audio or audio/visual
- Document the patient's consent to the telehealth call

TELEHEALTH AND PHE CODES

Not every behavioral health code is available for telehealth and be aware that policies may change. For the most accurate information, please consult with the specific payer. The following codes have been approved in the telehealth setting for both audio and/or visual:

CODES	E/M BEHAVIORAL
99406, 99407, 99408, 99409	Behavior Interventions
99421, 5 to 10 minutes 99422, 11 to 20 minutes 99423, 21 to 30 minutes	Other Virtual Visits, Telephone Only: E/M for new or established patients conducted by a physician or Qualified Health Professional
99441, 5 to 10 minutes 99442, 11 to 20 minutes 99443, 21 to 30 minutes	Other Virtual Visits, Video: E/M for new or established patients conducted by a physician or Qualified Health Professional