




Coverage provided by Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc., (Kaiser Permanente).

Mental Health

- To verify coverage, contracted providers can use the [Eligibility Inquiry tool](#) .
- To see prior authorization requirements or medical necessity review criteria, see the [Pre authorization Code Check](#) tool.
- Non-contracted providers can contact the Provider Assistance Unit at 1-888-767-4670.

Important information

- Procedure authorizations do not include the standard E&M code range
- All codes that are underlined under each reason name include the same range as code in parentheses.
- For procedures that include additional codes beyond the ones listed below the individual reason name, we've added a link to the Procedure Standard Code Range. If the link is not present, the additional codes are not included.

Ranges for types of authorization requests for Mental Health:

Eating Disorder Evaluation: (90837)

90785, 90791, 90832, 90834, 90837, 90839, 90840, 90845, 90846, 90847, 90853, 99050, G2010, G2012, G2061, G2062, G2063

Eating Disorder Intensive Outpatient Treatment: (90833)

90833, 90834, 90836, 90837, 90838, 90839, 90840, 90846, 90847, 90849, 90853, 90785, 90791, 90792, 97802, 97803, 98966, 98967, 98968, 98969, 98970, 98971, 98972, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99417, 99421, 99422, 99423, 99424, 99425, 99426, 99427, 99437, 99439, 99441, 99442, 99443, 99446, 99447, 99448, 99449, 99450, 99451, 99452, G2010, G2011, G2012, G2061, G2062, G2063, G2211, G2212, G2250, G2251, G2252, Q3014

ECT Outpatient: (90870)

90870, 98966, 98967, 98968, 98969, 98970, 98971, 98972, 99211, 99212, 99213, 99214, 99215, 99417, 99421, 99422, 99423, 99439, 99441, 99442, 99443, 99446, 99447, 99448, 99449, 99450, 99451, 99452, G2010, G2011, G2012, G2061, G2062, G2063, G2211, G2212, G2250, G2251, G2252, Q3014

Esketamine(Sprovato): (G2082)

G2082, G2083, S0013



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MH Counseling Evaluation: (90791)

90791

MH Intensive Outpatient Evaluation:

MH Intensive Outpatient Treatment: (905)

905, S9480

MH Medication Evaluation: (90791)

90791, 90792, 98966, 98967, 98968, 98969, 98970, 98971, 98972, 99202, 99203, 99204, 99205, 99417, 99421, 99422, 99423, 99424, 99425, 99426, 99427, 99437, 99439, 99441, 99442, 99443, 99446, 99447, 99448, 99449, 99450, 99451, 99452, G2010, G2011, G2012, G2061, G2062, G2063, G2211, G2212, G2250, G2251, G2252, Q3014

MH Medication Management: (90836)

90785, 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90846, 90847, 90849, 90853, 90885, 90887, 96127, 98966, 98967, 98968, 98970, 98971, 98972, 99050, 99051, 99053, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99341, 99342, 99345, 99347, 99348, 99349, 99350, 99358, 99367, 99368, 99417, 99421, 99422, 99423, 99424, 99425, 99426, 99427, 99437, 99439, 99441, 99442, 99443, 99444, 99446, 99447, 99448, 99449, 99450, 99451, 99452, 99495, 99496, G0463, G0508, G0509, G2012, G2061, G2062, G2063, G2212, G2250, G2251, G2252, Q3014

MH Outpatient Counseling: (90837)

90785, 90791, 90832, 90834, 90837, 90839, 90840, 90845, 90846, 90847, 90849, 90853, 96202, 96203, 99050, 99051, 99053, C7900, C7901, C7902, G2010, G2012, G2061, G2062, G2063

Neuropsychological Testing: (96132)

96132, 96133, 96136, 96137, 96138, 96139, 90791, 90792, 96116, 96121, 96146, 96125, 90832, 90833, 90834, 90837, 90846, 90847, 92507, 92511, 92512, 92516, 92520, 92521, 92522, 92523, 92524, 92526, 92610, 96105, 96110, 96112, 96113, 97803, 96130, 96131

Psychological Testing Evaluation: (90791)

90791, 90792

Psychological Testing: (96130)

96130, 96131, 90791, 90792, 96116, 90832, 90833, 90834, 90837, 90846, 90847, 96105, 96110, 96112, 96113, 96125

rTMS (Repetitive Transcranial Magnetic Stimulation): (90868)

90867, 90868, 90869, 96127

Date	Description
08/07/2020	Created



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08/15/2022	Added 99424, 99425, 99426, 99427, 99437 to Eating Disorder Intensive Outpatient Treatment, MH Medication Evaluation and MH Medication Management.
01/25/2023	Added 90849 to MH Outpatient Counseling.
01/31/2023	Removed 99201 from MH Medication Evaluation and MH Medication Management.
05/24/2023	Added 96202, 96203, C7900, C7901 and C7902 to MH Outpatient Counseling Added Reason Neuropsychological Testing.
07/12/2023	Removed termed code 99241 from Eating Disorder Intensive Outpatient Treatment. Removed termed codes 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99343, 99344, 99354, 99355, 99356, 99357 from MH Medication Management. Removed termed codes 99354 and 99354 from Neuropsychological Testing and Psychological Testing.
06/20/2024	Reformatted page and added Important information section.
08/08/2024	For Clarification Under Important information added new bullet -For procedures that include additional codes beyond the ones listed below the individual reason name, we've added a link to the Procedure Standard Code Range. If the link is not present, the additional codes are not included.

Information on this site is for informational purposes only and does not guarantee coverage or payment. All services must be considered medically necessary and certain services may be subject to additional clinical review criteria. All benefits are subject to the patient's medical coverage agreement including visit, quantity, and/or dollar limits.

The Kaiser Permanente Published Range page was developed to assist in administering plan benefits. For information concerning whether a specific service or benefit is covered, please refer to the patient's medical coverage agreement, the Provider Manual, your Provider contract, or call the Kaiser Permanente Provider Assistance Unit at 1-888-767-4670.

The Kaiser Permanente Published Range page results reflect the range information at the time of the inquiry only. Kaiser Permanente reserves the exclusive right to modify, revoke, suspend or change the Published Ranges, at Kaiser Permanente's sole discretion.

CPT codes deleted by the American Medical Association or HCPC codes deleted by Centers for Medicare & Medicaid Services will remain eligible for payment for valid dates of service for 24 months to allow time for claims submission.