

## BEHAVIORAL HEALTH ADD-ON CODES

### Scope

This policy applies to:

- |   |   |                                   |
|---|---|-----------------------------------|
| <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington | <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington Options, Inc. | <input type="checkbox"/> Medicaid |
| <input checked="" type="checkbox"/> Commercial                                  | <input checked="" type="checkbox"/> Medicare  |                                   |

### Policy

**Original Effective Date: 03/01/2024**

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will reimburse CPT codes 90833, 90836 and 90838 when medical records document the medical necessity for extended time and face-to-face time spent with the patient.

### Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services guidelines.

The appropriate E&M code should be selected based on the level of work (i.e., key components, including history, examination and medical decision making), not the basis of time.

When psychotherapy is provided on the same date as an E&M service, report one of the add on codes below to indicate that both services were provided. Time documented must match CPT code(s) billed.

CPT	Time
90833	30 minutes
90836	45 minutes
90838	60 minutes

Time spent providing the medical E&M service **should not be** included when selecting the timed psychotherapy code.

### Policy Definitions

**Add-on Code (AOC)** - is a Healthcare Common Procedure Coding System (HCPCS) / Current Procedural Terminology (CPT) code that describes a service that is performed in conjunction with the primary service by the same practitioner.

## Prerequisite(s)

Psychotherapy add-on code service and E&M code service must be significant and separately identifiable, and the time associated with each service cannot overlap.

## References

[LCD - Psychiatry and Psychology Services \(L34616\) \(cms.gov\)](#)

[Billing and Coding: Psychiatry and Psychology Services \(A57480\) \(cms.gov\)](#)

Prolonged Services

## Frequently Asked Questions

Not Applicable

## Revision History

03/01/2024 – New Policy

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.