

BEHAVIORAL HEALTH CODE SET TIP SHEET

CAPITATED BEHAVIORAL HEALTH (BH) CODE COVERED BY ELEVATE MEDICAID CHOICE:

Elevate Medicaid Choice covers these 6 codes: 90832, 90834, 90837, 90846, 90847, & 90791 when the service is rendered in a primary care setting. Elevate Medicaid Choice covers the first 6 visits per year, calculated using the State Fiscal Year (July 1 - June 30).

- » After 6 visits, the claims will be denied and redirected to Behavioral Health Managed Care Entities (BH MCEs) Colorado Access (COA).
- » Any visit outside of these codes in a primary care setting will be denied. Providers will need to direct claims to BH MCE COA.
- » Multiple procedure codes may be billed during a visit if they are in compliance with the National Correct Coding Initiative Standards.
- » First 6 visits do not require a covered BH diagnosis.

Short-Term Behavioral Health Service Procedure Codes	
90791	Diagnostic Evaluation without Medical Services
90832	Psychotherapy (30 minutes)
90834	Psychotherapy (45 minutes)
90837	Psychotherapy (60 minutes)
90846	Family Psychotherapy – without patient
90847	Family Psychotherapy – with patient
<i>Note: this excludes any primary care provider that is on the same site as a Medicaid-enrolled community mental health center.</i>	

EVALUATION & MANAGEMENT (E&M) CODES COVERED BY ELEVATE MEDICAID CHOICE:

- » Covered by Medical Benefit (Elevate Medicaid Choice), claim requires a behavioral health diagnosis and must be billed by behavioral health specialist.
- » Elevate Medicaid Choice is responsible for the following codes. The claim must include a Behavioral Health Diagnosis (e.g., not broken arm or medical condition from BH provider type). Elevate Medicaid Choice will pay these codes individually or with the BH add-ons.
- » There are no visit limitations on these codes.

- » Additional billing guidance and information can be found in the State Behavioral Health Services Billing Manual on the Colorado Department of Health Care Policy and Financing (HCPF) website at **[HCPF.Colorado.gov/Billing-Manuals](https://www.hcpf.colorado.gov/Billing-Manuals)**.

Evaluation & Management Codes	
99202	Office or OP – New (15 – 29 minutes)
99203	Office or OP – New (30 – 44 minutes)
99204	Office or OP – New (45 – 59 minutes)
99205	Office or OP – New (60 – 74 minutes)
99211	Office or OP – other
99212	Office or OP – Established (10 – 19 minutes)
99213	Office or OP – Established (20 – 29 minutes)
99214	Office of OP – Established (30 – 39 minutes)
99215	Office or OP – Established (40 – 45 minutes)
99221	Initial Hospital Care (at least 40 minutes)
99222	Initial Hospital Care (at least 55 minutes)
99223	Initial Hospital Care (at least 75 minutes)
99231	Subsequent Hospital Care (at least 25 minutes)
99232	Subsequent Hospital Care (at least 35 minutes)
99233	Subsequent Hospital Care (at least 50 minutes)
99234	Same Day Admit/DC (at least 45 minutes)
99235	Same Day Admit/DC (at least 70 minutes)
99236	Same Day Admit/DC (at least 85 minutes)
99238	Hospital Discharge (30 minutes or less)
99239	Hospital Discharge (more than 30 minutes)
99304	Initial Nursing Facility (25 minutes)
99305	Initial Nursing Facility (35 minutes)
99306	Initial Nursing Facility (45 minutes)
99307	Subseq Nursing Facility (10 minutes)
99308	Subseq Nursing Facility (15 minutes)
99309	Subseq Nursing Facility (30 minutes)
99310	Subseq Nursing Facility (45 minutes)
99315	Nursing Facility Discharge (30 minutes or less)
99316	Nursing Facility Discharge (more than 30 minutes)
99341	Residence Visit – New (at least 15 minutes)

99342	Residence Visit – New (30 minutes)
99344	Residence Visit – New (60 minutes)
99345	Residence Visit – New (75 minutes)
99347	Residence Visit – Established (15 minutes)
99348	Residence Visit – Established (30 minutes)
99349	Residence Visit – Established (40 minutes)
99350	Residence Visit – Established (60 minutes)
99366	Team Conf with Patient by HC Pro
99367	Team Conf without Patient by Phys
99368	Team Conf with Patient by HC Pro
99441	Telephone by Phys (5 – 10 minutes)
99442	Telephone by Phys (11 – 20 minutes)
99443	Telephone by Phys (21 – 30 minutes)

BH EVALUATION & MANAGEMENT (E&M) ADD-ON CODES COVERED BY ELEVATE MEDICAID CHOICE:

Add-on codes are covered by Elevate Medicaid Choice (not required for all E&M codes).

Evaluation & Management Add-On Codes	
90836	Psychotherapy (45 minutes with PT and/or Family Member when performed with an E&M)
90833	Psychotherapy (30 minutes with PT and/or Family Member when performed with an E&M)
90838	Psychotherapy (60 minutes with PT and/or Family Member when performed with an E&M)
<i>Reimbursed under the behavioral health capitation when billed with an Evaluation & Management code covered under the behavioral health capitation.</i>	

EVALUATION & MANAGEMENT (E&M) CODES COVERED BY COLORADO ACCESS (COA):

These specific E&M codes are covered by the Behavioral Health Benefit MCE (COA).

Evaluation & Management Consultation Codes	
99242	Outpatient Consultation (at least 20 minutes)
99243	Outpatient Consultation (at least 30 minutes)
99244	Outpatient Consultation (at least 40 minutes)

99245	Outpatient Consultation (at least 55 minutes)
99252	Hospital Consultation (at least 35 minutes)
99253	Hospital Consultation (at least 45 minutes)
99254	Hospital Consultation (at least 45 minutes)
99255	Hospital Consultation (at least 80 minutes)
Evaluation & Management Emergency Department Codes	
99281	Emergency department visit for problem that may not require health care professional
99282	Emergency department visit with straightforward medical decision making
99283	Emergency department visit with low level of medical decision making
99284	Emergency department visit with moderate level of medical decision making
99285	Emergency department visit with high level of medical decision making