

# CPT Coding Changes for 2013

## Getting Prepared



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### Presenter

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### Overview

- ▶ Overview of the changes to be implemented in 2013
- ▶ Timeline
- ▶ Explanation of key CPT definitions (Add-on, Time)
- ▶ Detailed explanation of the changes to the CPT framework
- ▶ How to prepare
- ▶ Where to learn more



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**Overview of changes implemented in 2013**

- ▶ Key codes have been deleted, e.g. 90862 Pharmacologic Management
- ▶ Key services have been assigned new numbers and/or are described differently, and all new codes can be used in all settings
- ▶ There are now two codes for an initial evaluation; one with medical services and one without




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**Overview of changes implemented in 2013**

- ▶ Psychotherapy is no longer distinguished by site of service
- ▶ Psychotherapy with E/M will shift to an E/M code with a Psychotherapy add-on
- ▶ There is a new crisis psychotherapy code
- ▶ Work previously described using the interactive codes is now done by using an add-on code




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**Timeline**

- ▶ August 31, 2012 ▶ CPT electronic files released; changes to CPT codes public
- ▶ Sept/Oct 2012 ▶ Newest edition of CPT manual available
- ▶ November 2012 ▶ CMS releases the Final Rule on the 2013 Physician Fee Schedule (includes final relative values)
- ▶ January 1, 2013 ▶ New code set goes in to effect – must bill using new CPT codes




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Detailed Explanation of Changes

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**Important concepts**

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- ▶ CPT Time Rule
  - ▶ "A unit of time is attained when the mid-point is passed"
  - ▶ "When codes are ranked in sequential typical times and the actual time is between two typical times, the code with the typical time closest to the actual time is used."
  - ▶ As an example, Codes of 30, 45, and 60 minutes are billed at 16-37 mins, 38-52 mins, and 53-67 mins.
- ▶ Add-on Codes
  - ▶ It is a code(s) that describes work that is performed in addition to the primary service
  - ▶ It is never reported alone
  - ▶ Examples include Psychotherapy, Interactive Complexity and Crisis Services

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**Important concepts**

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- ▶ Interactive Complexity
  - ▶ "Interactive" in previous codes was limited in use to times when physical aids, translators, interpreters, and play therapy was used
  - ▶ "Interactive Complexity" extends the use to include other factors that complicate the delivery of a service to a patient. These include:
    - ▶ Arguing or emotional family members in a session that interfere with providing the service
    - ▶ Third party involvement with the patient, including parents, guardians, courts, schools
    - ▶ Need for mandatory reporting of a sentinel event

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**Pharmacologic management**

- ▶ 90862 has been DELETED
- ▶ Psychiatrists should use the appropriate E/M series code (99xxx) to report this service
- ▶ A new add-on code – 90863 – has been added to describe pharmacologic management when performed by a prescribing psychologist; physicians SHOULD NOT use this code



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**Psychiatric diagnostic evaluation - Overview**

- ▶ A distinction has been made between diagnostic evaluations without medical services and evaluations with medical services
- ▶ Interactive services are captured using an add-on code
- ▶ These codes can be used in any setting



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**Psychiatric diagnostic evaluation - Overview**

- ▶ These codes can be used more than once in those instances where the patient and other informants are included in the evaluation
- ▶ Psychiatrists and other medical providers have the option of using the appropriate 99xxx series code in lieu of the 90792



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**Psychiatric diagnostic evaluation**

**2012**

**2013**

- ▶ 90801
- ▶ 90802
- ▶ 90791, Psychiatric diagnostic evaluation
- ▶ 90792, Psychiatric diagnostic evaluation with medical services
- ▶ 90791 plus 90875, Psychiatric diagnostic evaluation with interactive complexity
- ▶ 90792 plus 90875, Psychiatric diagnostic evaluation with medical services and with interactive complexity




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**Psychotherapy - Overview**

- ▶ Psychotherapy codes are no longer site specific
- ▶ Psychotherapy time includes face-to-face time spent with the patient and/or family member
- ▶ Time is chosen according to the CPT time rule
- ▶ Interactive psychotherapy is reported using the appropriate psychotherapy code along with the interactive complexity add-on code




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**Psychotherapy**

**2012**

**2013**

- ▶ 90804, 90816
- ▶ 90806, 90818
- ▶ 90808, 90821
- ▶ 90832, Psychotherapy, 30 minutes
- ▶ 90834, Psychotherapy, 45 minutes
- ▶ 90837, Psychotherapy, 60 minutes




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**Psychotherapy with interactive complexity**

**2012**

**2013**

- ▶ 90810, 90823
  - ▶ 90812, 90826
  - ▶ 90814, 90828
- ▶ 90832 plus 90875, Psychotherapy, 30 minutes with interactive complexity add-on
  - ▶ 90834 plus 90875, Psychotherapy, 45 minutes with interactive complexity add-on
  - ▶ 90837 plus 90875, Psychotherapy, 60 minutes with interactive complexity add-on




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**E/M with psychotherapy - Overview**

- ▶ Psychotherapy with E/M is now reported by selecting the appropriate E/M service code (99xxx series) and the appropriate psychotherapy add-on code
- ▶ The E/M code is selected on the basis of the site of service and the key elements performed
- ▶ The psychotherapy add-on code is selected on the basis of the time spent providing psychotherapy and does not include any of the time spent providing E/M services
- ▶ If no E/M services are provided, use the appropriate psychotherapy code (90832, 90834, 90837)




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**E/M codes**

The psychotherapy add-on code can be billed with the following E/M codes:

- Outpatient, established patient:
- ▶99212 – 99215
- Subsequent hospital care
- ▶99231 – 99233
- Subsequent nursing facility care
- ▶99307 – 99310
- Subsequent ALF care
- ▶99334 – 99337
- Subsequent home care
- ▶99341 - 99345




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**Psychotherapy with E/M vs E/M with psychotherapy**

**2012**

**2013**

Appropriate 99xxx series code plus one of the following:

- ▶ 90805, 90817
- ▶ 90807, 90819
- ▶ 90809, 90821

- ▶ 90833, Psychotherapy, 30 minutes when performed with an E/M
- ▶ 90836, Psychotherapy 45 minutes when performed with an E/M
- ▶ 90838, Psychotherapy 60 minutes when performed with an E/M




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**E/M with psychotherapy and interactive complexity**

**2012**

**2013**

- ▶ 90811, 90824
- ▶ 90813, 90827
- ▶ 90815, 90829

- ▶ 99xxx plus 90833 and 90785, E/M with psychotherapy, 30 minutes with interactive complexity add-on
- ▶ 99xxx plus 90836 and 90785, E/M with psychotherapy, 45 minutes with interactive complexity add-on
- ▶ 99xxx plus 90838 and 90875, E/M with psychotherapy, 60 minutes with interactive complexity add-on




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**Psychotherapy for crisis**

A new code and an add-on code have been added to describe crisis psychotherapy

- ▶90839, Psychotherapy for crisis, first 60 minutes
  - ▶ (CPT Rule applies: 30-74 minutes)
- ▶+90840, Psychotherapy for crisis each additional 30 minutes
- ▶Crisis Psychotherapy:
  - ▶ "an urgent assessment and history of a crisis state, a mental status exam, and a disposition. The treatment includes psychotherapy, mobilization of resources to defuse the crisis and restore safety, and implementation of psychotherapeutic interventions to minimize the potential for psychological trauma. The presenting problem is typically life threatening or complex and requires immediate attention to a patient in high distress."




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**Editorial changes to  
psychophysiological therapy**

Editorial changes were made to the times assigned to CPT codes 90875 and 90876 (Individual psychophysiological therapy with biofeedback training)

- ▶ 90875 is now 30 minutes
- ▶ 90876 is now 45 minutes



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How to Prepare

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**How to prepare:**

- ▶ Purchase a 2013 edition of the AMA CPT manual at [www.amabookstore.com](http://www.amabookstore.com)
- ▶ Learn how to select and document E/M codes (99xxx series)
- ▶ Locate and review any contracts with commercial payers and Medicaid
- ▶ Watch the APA and AAGP websites for more information



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Where to Learn More

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**Where to learn more:**

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- ▶ APA has developed educational materials and opportunities that can be found on the APA website:
- ▶ [www.psychiatry.org/practice](http://www.psychiatry.org/practice)

**Things such as:**

- ▶ A CPT coding crosswalk
- ▶ On-line course on E/M coding and documentation
- ▶ Live and recorded Webinars on E/M coding
- ▶ Live Q&A conference calls
- ▶ Face-to-face courses on CPT coding and documentation
- ▶ APA CPT Coding Network (for questions by email)

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**Contact APA or AAGP for additional help**

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You can reach CPT coding staff in the APA's Office of Healthcare Systems and Financing by:

- ▶ Telephone – 1-800-343-4672, or
- ▶ Email – [hsf@psych.org](mailto:hsf@psych.org)

Questions to AAGP from members will be directed to AAGP leadership knowledgeable on this topic

- ▶ Telephone – 1-301-654-7850
- ▶ Email – [main@AAGPonline.org](mailto:main@AAGPonline.org)

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