

*Optum, Public Sector San Diego, Medi-Cal CPT Codes and Rates- Psychologist - Effective Date 07/01/2020

This Fee Schedule supersedes the previous version dated 07/01/2019

New Modifiers: Codes approved to be rendered via Telehealth (GT) or Telephone (SC) are identified below with the modifiers; if the modifier is not included in the CPT Code Column it is not approved for this modality. Please Note the Place of Service (POS) for these modifiers is 02

SC = Services Rendered Via Telephone

GT = Services Rendered Via Telehealth

CPT Code	Service Description	Expanded Description	Minutes	Child Rates:	Adult Rates:
90791 (SC, GT)	Diagnostic Evaluation	Diagnostic evaluation is an integrated biopsychosocial assessment, including history, mental status, and recommendations. The evaluation may include communication with family or other sources.	50		
90832 (SC, GT)	Outpatient Psychotherapy with patient	Psychotherapy is the treatment of a mental illness and behavioral disturbances, in which the provider through definitive therapeutic communication attempts to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.	25		
90834 (SC, GT)	Outpatient Psychotherapy with patient	Psychotherapy is the treatment of a mental illness and behavioral disturbances, in which the provider through definitive therapeutic communication attempts to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.	50		
90846 (SC, GT)	Family Therapy without patient	Family psychotherapy without the patient present	50		
90847 (SC, GT)	Family Therapy (conjoint psychotherapy) with patient	Family psychotherapy (conjoint psychotherapy with patient present)	50		
90853	Group Psychotherapy	Group psychotherapy with a maximum of 8 patients (other than a multiple-family group) – rate is per patient	60		
99221 (SC, GT)	Initial hospital care—evaluation & management – Low Severity	Initial Hospital Care, which requires these three (3) key components: A comprehensive history; A comprehensive examination; and Medical decision making that is straightforward and of “low” complexity.	30		
99222 (SC, GT)	Initial hospital care—evaluation & management – Moderate Severity	Initial Hospital Care, which requires these three (3) key components: A comprehensive history; A comprehensive examination; and Medical decision making of “moderate” complexity.	50		
99223 (SC, GT)	Initial hospital care—evaluation & management – High Severity	Initial Hospital Care, which requires these three (3) key components: A comprehensive history; A comprehensive examination; and Medical decision making of “high”	70		
99231 (SC, GT)	Subsequent hospital care— Patient is stable, recovering or improving	Subsequent hospital care for the evaluation and management of a patient, which requires at least 2 of three (3) components: A problem focused interval history; A problem focused examination; Medical decision making that is straightforward or of	15		

Note: Providers are responsible for knowing the full description of the CPT code being billed and should review the current AMA American Medical Association CPT codebook for

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rules and guidelines.

CPT Code	Service Description	Expanded Description	Minutes	Child Rates:	Adult Rates:
99232 (SC, GT)	Subsequent hospital care – Patient is responding adequately to therapy or has developed minor complications	Subsequent hospital care for the evaluation and management of a patient, which requires at least 2 of three (3) components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of “moderate” complexity.	25		
99233 (SC, GT)	Subsequent hospital care – Patient is unstable or has developed a significant complication or new problem	Subsequent hospital care for the evaluation and management of a patient, which requires at least 2 of three (3) components: A detailed problem focused interval history; A detailed problem focused examination; Medical decision making of “high” complexity	35		
99251 (SC, GT)	Initial Inpatient Consultation - Self Limited or Minor	Inpatient consultation for a new or established patient, which requires these three (3) key components: A problem focused history; A problem focused examination; and Straightforward medical decision-making.	20		
99252 (SC, GT)	Initial Inpatient Consult – Low Severity	Inpatient consultation for a new or established patient, which requires these three (3) key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision-making.	40		
99253 (SC, GT)	Initial Inpatient Consult – Moderate Severity	Inpatient consultation for a new or established patient, which requires these three (3) key components: A detailed history; A detailed examination; and Medical decision making of “low” complexity.	55		
99341	Home Visit/New Patient – Low Severity	Home visit for the evaluation and management of a new patient, which requires these three (3) components: A problem focused history; A problem focused exam; and Straightforward medical decision making.	20		
99343	Home Visit/New Patient - Moderate to High Severity	Home visit for the evaluation and management of a new patient, which requires these three (3) components: A detailed problem focused history; A detailed problem focused examination, and Medical decision making of “moderate” complexity.	45		
99366 (SC, GT)	Medical Team Conference (Includes CFT Meetings for CWS clients)	Medical team conference in which a provider (non-physician) spends 30 minutes or more face-to-face with the client and/or family. This includes Child, Family and Interdisciplinary Team (CFT) meeting of health care professionals with CWS client and/or family. (1 unit = 30 minutes)	30		

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CPT Code	Service Description	Expanded Description	Minutes	Child Rates:	Adult Rates:
99368 (SC, GT)	Medical Team Conference (Without Face to Face)/Case Management	Medical team conference in which a provider (non-physician) spends 30 minutes or more not face-to-face with the client and/or family. This includes case management services are activities provided to help patients access medical, educational, social, prevocational, and rehabilitative or other needed community services.	30		
96130	Psychological Evaluations (First Hour- Max 1 unit/1 hour)	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour (Max 1 unit/1 hour)	60		
96131	Psychological Evaluations (Additional Hour(s) – 1 unit/1 hour)	Each additional 1 unit/1 hour (services as described in 96130)	60		
96136	Psychological Evaluations: Test Administration and Scoring (First Hour – Max 1 unit/30 minutes)	Psychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method, first 30 minutes (Max 30 minutes1/unit)	30		
96137	Psychological Evaluations: Test Administration and Scoring (Additional 1 unit(s)/30 minutes or 2 units/1 hour)	Each additional 1 unit/30 minutes (services as described in 96136)	30		

***Modifiers Below are Required to Ensure Accurate Claims Payments for Services Rendered by Telephone or Telehealth (New Modifiers are Bolded)**

SC = Telephone GT = Telehealth

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Billing Code – not CPT	Service Description	Expanded Description	Flat Rate
CANS01	CANS Training & Certification	Child Adolescent Needs & Strength Assessment Training and Certification; includes completion of RIHS training and successful certification (1x only/1 unit) – <i>This code is effective 04/01/2019</i>	
CANS02	CANS Report	Submission of an appropriate CANS Report (1 each/1 unit)	
CANS03	CANS Recertification	Annual Recertification for Child Adolescent Needs & Strength Assessment (1 annually/1 unit)	