

SAMHSA-HRSA
Center for Integrated Health Solutions

Making Integrated Care Work



Financing integrated Healthcare in New Jersey

as of: December 14, 2011

CPT Code	Diagnostic Code	Federally Qualified Health Centers (FQHC)						
		Medicare		State Medicaid				
		Paid?	Credentials	Paid?	Code	Credentials	Comments	
E & M Codes	99201-99205 New Pt	May be used only with physical health diagnosis	Yes	MD, PA, ANP	Y	W9840 – Medical Encounter/ T1015 HE – Psychiatric Encounter	Physician, Nurse Practitioner, Licensed Clinical Psychologist, Licensed Clinical Social Worker	Also report CPT Codes
	99211-99215 Est. Pt		Yes		Y	W9840 – Medical Encounter/ T1015 HE – Psychiatric Encounter	Physician, Nurse Practitioner, Licensed Clinical Psychologist, Licensed Clinical Social Worker	Also report CPT Codes
Health and Behavior (HABI)	96150 Assessment	Services are secondary to a physical health diagnosis	Yes	Non-physician mental health practitioners	Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
	96151 Reassessment		Yes	Psychologist only at this time; excludes CSW	Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
	96152 Individual Int.		Yes		Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
	96153 Group Int.		Yes		Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
	96154 Family + Patient		Yes		Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
	96155 Family w/o Pt		No		Y	T1015 HE	Physician, Psychologist, LCSW	Also report CPT Codes
Telemedicine	90801- Assess/ Psych.Eval		Yes	-Physician -Nurse Practitioner	N			Only Face-to-face
	90804 -09		Yes	-Physician Assistant	N			
	90862 Med Mgmt		Yes	-Clinical Nurse Specialist -Clinical psychologist* -Clinical social worker*	N			
	99201 – 99205 New Pt		Yes		N			
	99211 -99215		Yes	*Cannot bill for	N			

	Est. Pt. 99241-99245		No ¹	psychotherapy services that include medical evaluation and management services under Medicare. May not bill or receive payment for: 90805, 90807, and 90809.	N			
	99251 -99255		No		N			
	F-U Inpt Consul - limited		Yes		N			
	F-U Inpt Consul – intermediate		Yes		N			
	F-U Inpt - Complex		Yes		N			
	Initial 30 min		Yes		N			
	Initial 50 min		Yes		N			
	Initial 70 min		Yes		N			
	Facility Fee		Yes		N			
Substance Abuse Codes	90804 – 90815		Yes	Physicians and non-physicians such as clinical social worker, & clinical psychologists licensed by the state	N			
	90847,90853, 90857		Yes		N			
	AOD Assess		Yes					
	BH Screening		Yes					
	BH Counseling		Yes					
	AOD Group		Yes					
	IOP Services		No					
Mental Health	90801-90815	Used with BH Diagnosis Codes	Yes	Physicians and non-physicians, such as clinical social workers & clinical psychologists licensed by the state	Y	T1015 HE	Physicians, Psychologists and other licensed Master’s level clinicians	90801, 90804, 90805, 90806, 90807 only.
	90847, 90853, 90857,90772, 90862,90865, 90887, 96101		Yes		Y	T1015 HE	Physicians, Psychologists and other licensed Master’s level clinicians	90847, 90853, 90887, 96101 only. 90862 Physician only.
	BH Coun&Ther		Yes		Y	T1015 HE	Physicians, Psychologists and state licensed Master’s level clinicians	
	MH Assess		Yes		Y	T1015 HE	Physicians, Psychologists and state licensed Master’s level clinicians	
	Crisis Stab.		No ²		N			
Two Services in One Day Billable at the FQHC?					Yes – Under some circumstances (NJAC 10-66-6-4-1)			

¹ Medicare Manual Update, Publication 100-04 notes that CPT 99241-99245 has been discontinued effective 1/1/10. These codes are to be replaced by CPT 99201-99215. Likewise, CPT 99251-99255 has been replaced by G0425-G0427.

² No separate billing code for crisis stabilization services, however, Medicare does permit a psychiatrist to bill for extended appointments under other CPT codes.

Case Mgmt			No		N			
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CPT Code		Diagnostic Code	Community Mental Health Centers (CMHC)					
			Medicare			State Medicaid		
			Paid?	Credentials	Paid?	Code	Credentials	Comments
E & M Codes	99201-99205 New Pt	Used only with physical health diagnosis						
	99211-99215 Est. Pt							
Health and Behavior (HABI)	96150 Assessment	Services are secondary to a physical health diagnosis	No	Non-physician mental health practitioners Psychologist only at this time; excludes CSW	Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
	96151 Reassessment		No		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
	96152 Individual Int.		No		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
	96153 Group Int.		No		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
	96154 Family + Patient		No		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
	96155 Family w/o Pt		No		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	
Telemedicine	90801- Assess/ Psych.Eval		Yes	-Physician -Nurse Practitioner -Physician Assistant -Clinical Nurse Specialist -Clinical psychologist* -Clinical social worker* *Cannot bill for psychotherapy services that include medical evaluation and management services under Medicare. May not bill or receive payment for:	N			Only face-to-face services are billable.
	90804 -09		Yes		N			
	90862 Med Mgmt		Yes		N			
	99201 – 99205 New Pt		Yes		N			
	99211 -99215 Est. Pt.		Yes		N			
	99241-99245		No		N			

	99251 -99255		No	90805, 90807, and 90809. Note: When a CMHC serves as an originating site, the originating site facility fee does not count toward the number of services used to determine payment for partial hospitalization services.	N			
	F-U Inpt Consul - limited		Yes		N			
	F-U Inpt Consul – intermediate		Yes		N			
	F-U Inpt - Complex		Yes		N			
	Initial 30 min		Yes		N			
	Initial 50 min		Yes		N			
	Initial 70 min		Yes		N			
	Facility Fee		Yes		N			
Substance Abuse Codes	90804 – 90815		Yes	Physicians and non-physicians such as clinical social worker, & clinical psychologists licensed by the state	Y	Z2003	Physicians, Psychologists and state licensed Master's level clinicians	
	90847,90853, 90857		Yes		Y	Z2000	Physicians, Psychologists and state licensed Master's level clinicians	
	AOD Assess		Yes		N			
	BH Screening		Yes		N			
	BH Counseling		Yes		N			
	AOD Group		Yes		Y	Z2004	Physicians, Psychologists and state licensed Master's level clinicians	
	IOP Services		No		N			
Mental Health	90801 -90819		Yes	Physicians, CSW's, clinical nurse practitioners, clinical nurse specialists, and psychologists licensed by States	Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	90801, 90804, 90805, 90806, 90807 only.
	90821 -90824		Yes		N			
	90826 -90829		Yes		N			
	90845,90847, 90853,90857, 90865,96101		Yes		Y	CPT and "UC" modifier	Physicians, Psychologists and state licensed Master's level clinicians	90847, 90853, 96101 only
	90862		y		Y	CPT and "UC" modifier	Physicians only.	
	Crisis Services				Y	Z0100	Physicians, Psychologists and state licensed Master's level clinicians	

Case Mgmt					Y	Z5006	State approved Case Managers	
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Sources:

New Jersey Administrative Code 10:66-4.1 Federally qualified health center (FQHC) services
<http://www.michie.com/newjersey/lpext.dll/uanjadmin/1/52420/5a928/5acca/5acd3?fn=document-frame.htm&f=templates&2.0#>

New Jersey Administrative Code 10:66-6.1 Subchapter 6 Centers For Medicare & Medicaid Services Healthcare Common Procedure Coding System (HCPCS)
<http://www.michie.com/newjersey/lpext.dll/uanjadmin/1/52420/5a928/5aefb?fn=document-frame.htm&f=templates&2.0#>

NOTE: Two services in one day
 New Jersey Administrative Code 10:66-4.1 paragraph 2.

2. A medical encounter is a face-to-face contact between a beneficiary and a physician or other licensed practitioner acting within his or her respective scope of practice, including a podiatrist, optometrist, chiropractor, advanced practice nurse, or nurse midwife.

i. Normally, only one medical encounter is covered per beneficiary, per day. More than one medical encounter is covered, however, when the beneficiary is seen by more than one licensed practitioner for the prevention, treatment or diagnosis of different injuries or illnesses, and practitioners of appropriate different specialties are involved.

ii. More than one medical encounter is also allowed if a beneficiary leaves the center after having been seen by a practitioner, then returns to the center and is seen by another practitioner on the same day.

iii. More than two medical encounters during a week for a beneficiary require clear documentation in the beneficiary's medical record demonstrating the medical necessity of the encounter(s).

iv. Interpretation of results of tests or procedures not requiring face-to-face contact between a beneficiary and a practitioner, and referrals to specialists, do not constitute a medical encounter.