

CODE	DESCRIPTION	MANAGEMENT
Non-par provider requires a Prior Auth for all services		
Room & Board Inpatient	Room & Board Inpatient Psych Per Diem	PRIOR AUTHORIZATION
90785	Interactive complexity code	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90791	Psychiatric diagnostic evaluation	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90792	Psychiatric diagnostic evaluation with medical services	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90832	Psychotherapy, 30 minutes with patient and/or family member (16-37 minutes)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90833	Psychotherapy, 30 minutes with patient and/or family member when performed with an E/M service	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90834	Psychotherapy, 45 minutes with patient and/or family member (38-52 minutes)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90836	Psychotherapy, 45 minutes with patient and/or family member when performed with an E/M service	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90837	Psychotherapy, 60 minutes with patient and/or family member. (53+ minutes)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90838	Psychotherapy, 60 minutes with patient and/or family member when performed with an E/M service	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90839	Psychotherapy for crisis, first 60 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90840	Psychotherapy for crisis(each additional 30 minutes) List separately in addition to primary service CPT code.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90845	Psychoanalysis	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90846	Family Psychotherapy (without the patient present) (53+ Min)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90847	Family Psychotherapy (with the patient present) (53+ Min)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90849	Multiple-family group psychotherapy	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90853	Group psychotherapy (85+ Min)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
90870	Electroconvulsive therapy (includes necessary monitoring)	PRIOR AUTHORIZATION
96101	Psychological testing with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96102	Psychological testing administered by technician with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96103	Psychological testing administered by computer with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96105	Assessment of Aphasia with intpretation and report	PRIOR AUTHORIZATION
96111	Developmental Testing, extended with interpretation and report	PRIOR AUTHORIZATION
96116	Neurobehavioral Status Examination, with report	PRIOR AUTHORIZATION
96118	Neuro-psychological testing with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96119	Neuro-psychological testing administered by technician with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96120	Neuro-psychological testing administered by computer with interpretation and report by psychologist or physician per hour.	PRIOR AUTHORIZATION
96125	Cognitive test by healthcare professional	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
96127	Brief emotional/behavioral assessment	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
96150	Health and behavior assessment each 15 minutes.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
96151	Health and behavior re-assessment each 15 minutes.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)

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96152	Health and behavior intervention, individual each 15 minutes.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
96153	Health and behavior intervention, group each 15 minutes.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
96154	Health and behavior intervention, family and patient each 15 minutes.	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99201	New patient office or other outpatient visit, typically 5 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99202	Newpatient office or other outpatient visit, typically 10 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99203	New patient office or other outpatient visit, typically 15 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99204	New patient office or other outpatient visit, typically 25 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99205	New patient office or other outpatient visit, typically 40 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99211	Established patient office or other outpatient visit, typically 5 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99212	Established patient office or other outpatient visit, typically 10 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99213	Established patient office or other outpatient visit, typically 15 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99214	Established patient office or other outpatient visit, typically 25 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99215	Established patient office or other outpatient visit, typically 40 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99406	Smoking and tobacco use cessation counseling visit, intensive, up to 10 minutes	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
99407	Smoking and tobacco use cessation counseling visit, intensive, greater than 10 minutes (Must use Group Modifier (see key) if service is provided to 2 or more patients)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
G0176	Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more) (Must use Group Modifier (see key) if service is provided to 2 or more patients)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)
G0177	Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more) (Must use Group Modifier (see key) if service is provided to 2 or more patients)	No Prior Auth (Refer to CMS for code and diagnosis guidelines)