

Non-Specialty Mental Health Services: Reimbursement Rates and Billing Codes

Page updated: December 2021

This section lists the CPT® and HCPCS codes and rates for Non-Specialty Mental Health Services (NSMHS). Refer to the *Non-Specialty Mental Health Services: Psychiatric and Psychological Services* section in this manual for policy information. Reimbursement will be made at the provider's usual charge to the general public, not to exceed the following maximum allowances (*California Code of Regulations* [CCR], Title 22, Section 51505.3).

The rate at which a NSMHS may be reimbursed is dependent on whether the service is administered by a medical doctor (MD), nurse practitioner (NP), physician assistant (PA), Licensed Psychologist (LP), Licensed Professional Clinical Counselor (LPCC), Licensed Clinical Social Worker (LCSW) and/or a Licensed Marriage and Family Therapist (LMFT).

Note: Please note that the general code descriptions included are provided to assist with interpreting and navigating the content; providers are responsible for referencing the appropriate codebooks for up-to-date full descriptions when considering which code is appropriate to bill for the services rendered.

Case Management Services

Case Management Service Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
99366	Medical team conference, recipient and/or family present per 30 minutes,	N/A	\$18.98
99368	Medical team conference, recipient and/or family not present, per 30 minutes	N/A	\$18.98

Central Nervous System Assessments/Tests

Central Nervous System Assessments/Tests Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
96105*	Assessment of aphasia, per hour	\$51.20	\$51.20
96110	Developmental screening, per standardized instrument	\$54.90	\$54.90
96112*	Developmental test administration, first hour	\$116.57	\$116.57
96113*	Developmental test administration, each additional 30 minutes	\$51.87	\$51.87

Central Nervous System Assessments/Tests Code Table (continued)

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
96116*	Neurobehavioral status exam, first hour	\$56.20	\$56.20
96121*	Neurobehavioral status exam, each additional hour	\$70.17	\$70.17
96127	Brief emotional/behavioral assessment	\$4.81	\$4.81
96130*	Psychological testing evaluation services; first hour	\$99.60	\$99.60
96131*	Psychological testing evaluation services; each additional hour	\$75.81	\$75.81
96132*	Neuropsychological testing evaluation services; first hour	\$113.37	\$113.37
96133*	Neuropsychological testing evaluation services; each additional hour	\$86.43	\$86.43
96136*	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests; first 30 minutes	\$41.88	\$41.88
96137*	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests; each additional 30 minutes	\$39.01	\$39.01
96138*	Psychological or neuropsychological test administration and scoring by technician, two or more tests; first 30 minutes	\$35.69	\$35.69
96139*	Psychological or neuropsychological test administration and scoring by technician, two or more tests; each additional 30 minutes	\$35.69	\$35.69
96146*	Psychological or neuropsychological test administration and scoring via electronic platform	\$1.84	\$1.84

Cognitive Rehabilitation

Cognitive Rehabilitation Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
97129*	Therapeutic interventions that focus on cognitive function and compensatory strategies; initial 15 minutes	\$20.78	\$20.78
97130*	Therapeutic interventions that focus on cognitive function and compensatory strategies; each additional 15 minutes	\$19.84	\$19.84

Health and Behavior Assessment/Intervention

Health and Behavior Assessment/Intervention Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
96156	Health behavior assessment or re-assessment	\$84.30	\$84.30
96158	Health behavior intervention, individual; initial 30 minutes	\$57.63	\$57.63
96159	Health behavior intervention, individual; each additional 15 minutes	\$20.11	\$20.11
96164	Health behavior intervention, group; initial 30 minutes	\$8.52	\$8.52
96165	Health behavior intervention, group; each additional 15 minutes	\$4.01	\$4.01
96167	Health behavior intervention, family (with patient present); initial 30 minutes	\$61.83	\$61.83
96168	Health behavior intervention, family (with patient present); each additional 15 minutes	\$21.95	\$21.95
96170	Health behavior intervention, family (without patient present); initial 30 minutes	\$70.29	\$70.29
96171	Health behavior intervention, family (without patient present); each additional 15 minutes	\$25.55	\$25.55

Psychiatric Diagnostic Evaluation

Psychiatric Diagnostic Evaluation Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
90791	Psychiatric diagnostic evaluation	\$128.08	\$128.08
90792	Psychiatric diagnostic evaluation with medical services	\$103.25	N/A

Psychotherapy

Psychotherapy Code Table

CPT Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
90832	Psychotherapy, 30 minutes	\$52.87	\$18.98
90833	Psychotherapy, 30 minutes with an evaluation and management service	\$34.49	N/A
90834	Psychotherapy, 45 minutes	\$67.16	\$67.16
90836	Psychotherapy, 45 minutes with an evaluation and management service	\$56.02	N/A
90837	Psychotherapy, 60 minutes	\$98.02	\$38.01
90838	Psychotherapy, 60 minutes with an evaluation and management service	\$90.57	N/A
90839	Psychotherapy for crisis; first 60 minutes	\$38.01	\$38.01
90840	Psychotherapy for crisis; each additional 30 minutes	\$18.98	\$18.98
90846	Family psychotherapy (without patient present), 50 minutes	\$86.64	\$86.64
90847	Family psychotherapy (with patient present), 50 minutes	\$89.65	\$89.65
90849	Multiple-family group psychotherapy	\$31.85	\$31.85
90853	Group psychotherapy	\$3.47	\$14.48

Miscellaneous NSMHS

Miscellaneous NSMHS Code Table

Billing Code	General Code Description	MD, NP, PA	LP, LCSW, LPCC, LMFT
90785	Interactive complexity	\$3.88	\$3.88
90880	Hypnotherapy	\$52.11	\$52.11
99406	Smoking and tobacco use cessation counseling visit; intermediate, 3 to 10 minutes	\$10.41	\$10.41
99407	Smoking and tobacco use cessation counseling visit; intensive, more than 10 minutes	\$19.93	\$19.93
G0442	Annual alcohol misuse screening	\$16.50	\$16.50
G9919	Adverse Childhood Experience (ACEs) screening, high risk	\$29.00	\$29.00
G9920	ACEs screening, lower risk	\$29.00	\$29.00
H0049	Drug use screening	By Report	By Report
H0050	Alcohol and drug services, brief intervention	By Report	By Report

End of Life Services

Refer to the *End of Life Option Act Services* section in this manual for additional information.

Supervising Clinician Billing Requirements for Psychological Services

Associate marriage and family therapists, associate professional clinical counselors, associate clinical social workers and psychology assistants may render the above related psychology services under a supervising clinician. The claim must list the associate or assistant's name in the *Additional Claim Information* field (Box 19) or on an attachment, along with the supervising clinician's National Provider Identifier number as the "billing provider."

Legend

Symbols used in the document above are explained in the following table.

Symbol	Description
«	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
»	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.
«*	This service is not reimbursable to LCSWs, LPCCs and LMFTs.»