

Tip Sheet - Psychologist (Psy)

Assessments - There are 4 different IDEA assessments

MET/Evaluation (initial and 3- year): The evaluation should be reported only once, even if the evaluation is administered over several days. The date of service is the date eligibility is determined (IEP meeting).

IEP (initial and annual): Participation in the IEP/IFSP meeting & encompasses all work done for the IEP. The date of service is the date of the IEP meeting. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation.

>TM Modifier

<u>REED:</u> Participation in the Reviewing of Existing Evaluation Data (REED). The date of service is the date the IEP team completes its review of the data. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation. >TL Modifier

Evaluations not related to MET or IEP: Evaluations completed for purposes other than the IDEA Assessment. The date of service is the date the test is completed, even if the evaluation is administered over several days.

No Modifier

H0031:HT	Mental Health Assessment for the initial eligibility determination or 3 year re-evaluation for Special Education eligibility. Claim the service once using the determination date of eligibility for special education/early on services or recertification date. (IEP/IFSP date). The determination date must be included in the assessment. This code encompasses all activities related to the assessment; observations, writing reports & time spent with student/family for assessment.
H0031:TM	Multi-disciplinary team assessment (participation) to develop, review and revise IEP/IFSP treatment plan. The date of service is the date of the multi-disciplinary team assessment, i.e., IEP/IFSP date. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation.
H0031:TL	Participation in the Review of Existing Evaluation Data (REED). The date the REED form is completed is recorded as the service date. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation.
H003 I	Mental Health Assessment by non-physician, excluding initial and 3-year re-evaluation. Results must be included in a written report. The date of service is the date the assessment/evaluation is completed (Dated prior to the IEP).
96110:HT	Developmental screening for the initial eligibility determination or 3 year re-evaluation for Special Education eligibility. Claim the service once using the determination date of eligibility for special education/early on services or recertification date. (IEP/IFSP date). The determination date must be included in the assessment. This code encompasses all activities related to the assessment; observations, writing reports & time spent with student/family for assessment.
96110:TM	Multi-disciplinary team assessment (participation) to develop, review and revise IEP/IFSP treatment plan. The date of service is the date of the multi-disciplinary team assessment, i.e., IEP/IFSP date. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation.
96110:TL	Participation in the Review of Existing Evaluation Data (REED). The date the REED form is completed is recorded as the service date. Attendance is not necessary. Your written report (submitted prior to the meeting) is considered participation.
96110	Developmental screening by non-physician (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument. Results must be included in a written report. The date of service is the date the assessment/evaluation is completed (Dated prior to the IEP).

Sample Service Note:

Worked on self-esteem activity to improve classroom behavior and decrease discipline referrals. Student needed prompting to participate.

Sample Summary Note:

Student was able to identify good qualities about himself. However, he appears to be depressed and lack self-esteem. He has made minimal progress in this area.

Billing Codes

Annual Requirements:

• Therapy and treatment services (other than crisis intervention) are reportable only if the student's IEP includes Direct or Direct/Consultation services with a time and frequency.

Therapy/Treatm	nent
90832	Psychotherapy (the treatment of a mental disorder or behavior disturbance), 30 minutes; actual time may be 16-37 minutes. May include fact-to-face time with family as long as student is present for part of the session.
NOTE:	30 minutes – codes 90832 and 90834 cannot both be billed on the same day.
90834	Psychotherapy , Same as above, except 45 minutes ; actual time can be 38-52 minutes
NOTE:	45 minutes - codes 90832 and 90834 cannot both be billed on the same day.
90832+90785	Psychotherapy with Interactive Component, 30 minutes; actual time can be 16-37 minutes. Use the combination code when specific communication factors complicate delivery of service. One of the following must exist to use this code combination:
	1. Maladaptive Communication (i.e. high anxiety, reactivity, repeated questions or disagreement).
	2. Emotional or Behavioral Conditions inhibiting implementation of treatment plan.
	3. Mandated reporting such as in situations involving abuse or neglect.
	 Use of play equipment, devices, interpreter or translator required due to inadequate language expression or different language spoken between student and professional.
NOTE:	30 minutes – codes 90832 & 90785 and 90834 & 90785 cannot both be billed on the same day
90834+90785	Psychotherapy with Interactive Component, Same as above, except actual time 45 minutes
NOTE:	Minimum 38-52 minutes – codes 90834 & 90785 and 90832 & 90785 cannot both be billed on the same day
90846	Family psychotherapy (conjoint psychotherapy) without the patient present.
90847	Family psychotherapy (conjoint psychotherapy) with patient present.
90853	Group psychotherapy (non-family) 2-8 students
H0004	Behavioral health individual counseling and therapy, individual, per 15 minutes. Beginning and ending time of service must be documented.
S9484	Crisis Intervention services (per hour) are unscheduled activities performed for the purpose of resolving an immediate crisis situation. Includes crisis response, assessment, referral and direct therapy. Since these services are unscheduled activities, they are not listed in the student's IEP/IFSP treatment plan.
	only want to track what you've done but you know it's not Billable, SO The Code(s) below
are your answ	er!
>OTHER	Non-Billabe EXAMPLES:
>COMMUNICATIO	N I) A service was rendered that was not billable (could not be classified under one of the codes listed above)

- >COMMUNICATIO
- >CONSULTATION
- >GROUP SIZE > 8
- >INTERN
- >NO SCHOO DAY
- >PROVIDER NOT AVAILABLE
- >PROVIDER ABSENT
- >STUDENT NOT AVAILABLE
- >STUDENT ABSENT

- 1) A service was rendered that was not billable (could not be classified under one of the codes listed above)
- 2) Services were not rendered because a key participant was absent or not available.
- 3) You wish to make a record-keeping only entry into the system. Records created using this code will NOT be billed.