

Behavioral Health Services Reimbursable Via Telehealth

Physician	
90792	Psychiatric diagnostic evaluation with medical services
99202*	E/M new patient level II
99203*	E/M new patient level III
99204*	E/M new patient level IV
99205*	E/M new patient level V
99211*	E/M established patient level I
99212*	E/M established patient level II
99213*	E/M established patient level III
99214*	E/M established patient level IV
99215*	E/M established patient level V
99231***	Subsequent hospital care
99232***	Subsequent hospital care
99233***	Subsequent hospital care
90833*	Psychotherapy, 30 minutes when performed with E/M service
90836*	Psychotherapy, 45 minutes when performed with E/M service
90838*	Psychotherapy, 60 minutes when performed with E/M service
Individual Practitioner	
90785	Interactive complexity add-on
90791	Psychiatric diagnostic evaluation
90832	Psychotherapy, 30 minutes
90834	Psychotherapy, 45 minutes
90837	Psychotherapy, 60 minutes
90846	Family psychotherapy, without the patient present, 50 minutes
90847	Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes
90853	Group psychotherapy (other than of a multiple-family group)
Outpatient Behavioral Health Agency	
H0001	Screening referral complex
H0004	Psychotherapy (individual, family, and group)
H0031	BH Assessment (non-MD)
H0032	BH Service plan development
H0039	PACT
H2011	Crisis intervention per 15 minutes
H2015	Individual community recovery support
H2017	Individual psychosocial rehabilitation
T1027	Family training and support
S9485	Crisis assessment (urgent recovery clinic encounter)
90839**	Psychotherapy for crisis, first 60 minutes
90840**	Psychotherapy for crisis, each additional 30 minutes

*Only reimbursable via telehealth when provided by a licensed Psychiatrist

**Only reimbursable when provided by a certified mobile crisis team

***Only reimbursable in an inpatient psychiatric facility