



# Revolutionizing Behavioral Health Services With the CPT® Code Set

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# Our Presenters



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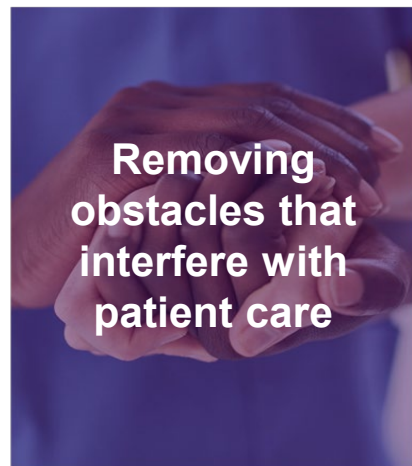
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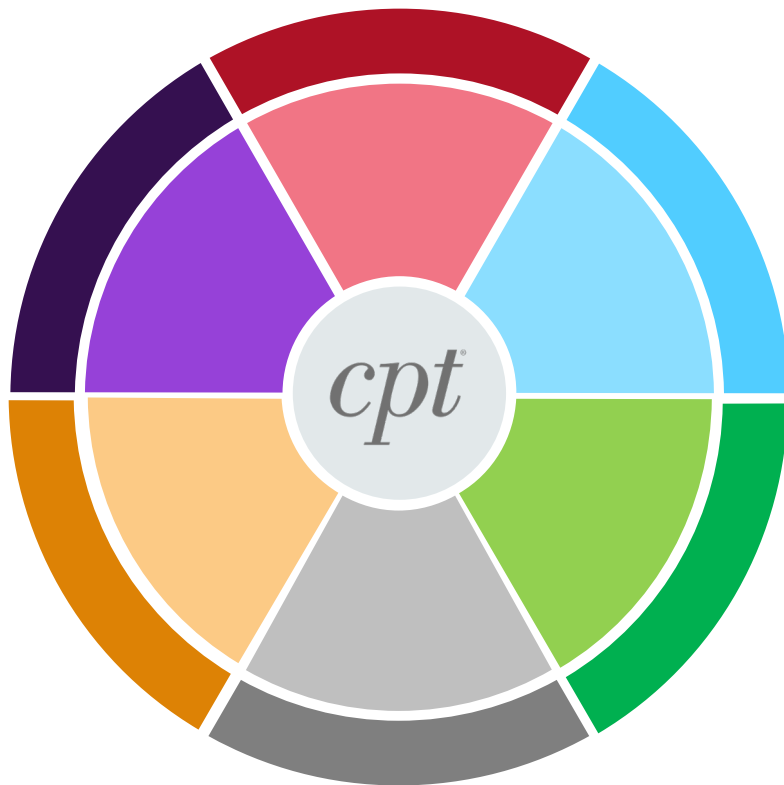
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# AMA: The Physicians' Powerful Ally in Patient Care



# CPT®: The Foundation of the Health Care Ecosystem



## Medical Code Set Terminology Standard



## Claims-Based Reporting

The primary terminology for medical services and procedures.



## Fee-for-Service Payment

Integral in the predominant fee-for-service payment system.



## Quality Measures

Determine the scope of medical services included for measurement.



## Alternative Payment Models

Determine the scope of medical services included in the model.



## Research

Evaluation and assessment of quality, volume, cost.

# How CPT® Codes Support the Delivery of Behavioral Health Services

Leslie Prellwitz, MBA, CCS, CCS-P  
Director, CPT Content Management & Development  
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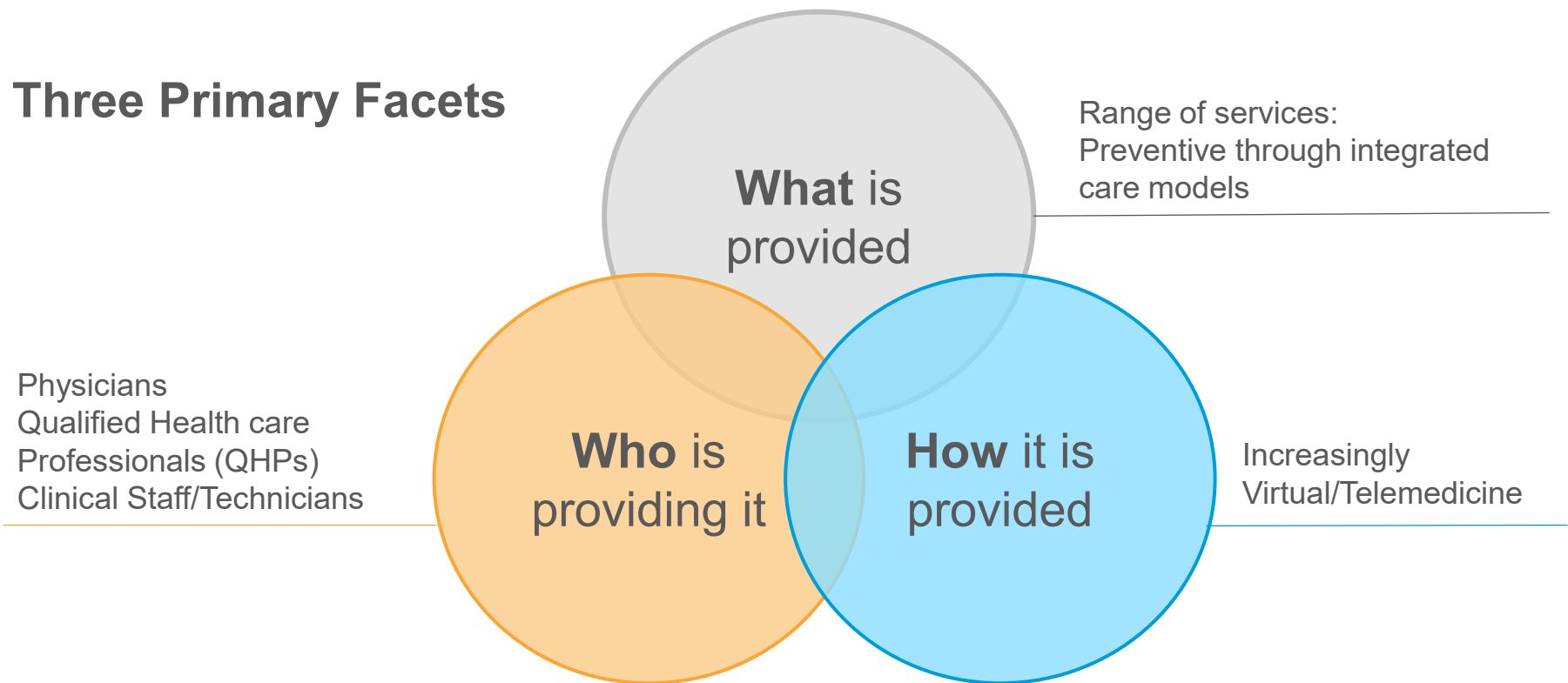
# CPT® Code Set Categories



**Behavioral  
Health**

# How CPT® Supports Behavioral Health

## Three Primary Facets





# CPT® Codes for Behavioral Health: Spanning the Care Continuum

Preventive	Screening / Assessments	Treatment	Care Coordination
Preventive Medicine	Psychiatric Diagnostic Procedures	Psychotherapy (Individual)	General Behavioral Health Integration Care Management
Behavior Change Interventions	Developmental / Behavioral Screening	Psychotherapy for Crisis	Psychiatric Collaborative Care Management
	Psychological Testing and Evaluation	Adaptive Behavior Treatments	Cognitive Assessment and Care Plan Services
	Adaptive Behavior Assessments	Remote Therapeutic Monitoring Services (Cognitive Behavioral Therapy)	
	Health Behavior Assessment and Intervention		

# CPT® Codes for Behavioral Health: Preventive Care

10 codes

Early Access—Engage patients earlier in the health continuum  
Ability to address independently from medical illness

## Preventive Medicine

Services provided face-to-face by a physician or other qualified health care professional

Purpose of promoting health and preventing illness or injury

Accommodates individual patients and groups

**CPT codes 99401, 99402, 99403, 99404, 99411, 99412**

## Behavior Change Interventions

For persons who have a behavior that is often considered an illness itself, such as tobacco use and addiction, substance abuse/misuse, or obesity

Reported when performed as part of the treatment of condition(s) related to or potentially exacerbated by the behavior or when performed to change the harmful behavior that has not yet resulted in illness

**CPT codes 99406, 99407, 99408, 99409**

See CPT 2024 Professional Edition *for complete code descriptors, instructions and guidelines.*

# CPT® Codes for Behavioral Health: Screening/Assessments

26 codes

Variety of levels of screening/assessment/evaluation  
Who: Physician/QHP or technician (under supervision where appropriate); with flexibility

## Psychological Testing and Evaluation

Psychological and Neuropsychological  
Test administration and scoring  
(physician/QHP, technician, automated)

**CPT codes: 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146**

## Developmental/Behavioral Screening

Brief emotional/behavioral assessment

**CPT code: 96127**

## Psychiatric Diagnostic Evaluation

Also with medical services

**CPT codes: 90791, 90792**

## Adaptive Behavior Assessments

Address deficient adaptive behaviors, maladaptive behaviors, or other impaired functioning secondary to above

**CPT codes: 97151, 97152, 0362T**

## Health Behavior Assessment and Intervention

Primary diagnosis is physical in nature

Focus is on psychological, behavioral, emotional, cognitive, and interpersonal factors complicating medical conditions and treatments

**CPT codes: 96156, 96158, 96159, 96160, 96161, 96164, 96165, 96167, 96168, 96170, 96171**

See CPT 2024 Professional Edition *for complete code descriptors, instructions and guidelines.*

# CPT® Codes for Behavioral Health: Treatment

22 codes

Focused behavioral health treatment

## Adaptive Behavior Treatments

Address treatment targets and goals based on previous assessments

Adaptive treatment behavior by protocol

Accommodate individual, family and group treatments

**CPT codes 97153, 91754, 97155, 97156, 97157, 97158, 0373T**

## Psychotherapy

Physician/QHP attempts to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and encourage personality growth and development through definitive therapeutic communication

E/M Integration possible

**CPT codes 90832, 90833, 90834, 90836, 90837, 90838, 90846, 90847, 90853**

## Psychotherapy for Crisis

Urgent assessment and history of a crisis state, a mental status exam, and a disposition

Psychotherapy, mobilization of resources to defuse the crisis, psychotherapeutic interventions to minimize the potential for psychological trauma

**CPT codes 90839, 90840**

## Remote Therapeutic Monitoring Services (Cognitive Behavioral Therapy)

Review and monitoring of data related to signs, symptoms, and functions of a therapeutic response

Also incorporates Remote Therapeutic Monitoring Treatment Management Services

**CPT codes 98975, 98978, 98980, 98981**

See CPT 2024 Professional Edition *for complete code descriptors, instructions and guidelines.*

# CPT® Codes for Behavioral Health: Care Management

5 codes

Expansive coordination and collaboration  
Report over extended time periods

## Psychiatric Collaborative Care Management

Directed by treating physician/QHP

Comprehensive and structured roles:  
Physician/QHP, Behavioral Health Care Manager and Psychiatric Consultant

Provided when a patient requires a behavioral health care assessment; establishing, implementing, revising, or monitoring a care plan; and provision of brief interventions

Reported per calendar month

**CPT codes 99492, 99493, 99494**

## Cognitive Assessment and Care Plan Services

Comprehensive

Patient exhibits signs and/or symptoms of cognitive impairment

Required to establish or confirm a diagnosis, etiology and severity for the condition

Longer-term use: not reported more than once every 180 days

**CPT code 99483**

## General Behavioral Health Integration Care Management

Performed by clinical staff under physician/QHP supervision

Flexibility in Assessment and treatment plan, and office/practice functions

May be used in any outpatient setting, provided: the reporting professional has an ongoing relationship with the patient and clinical staff, and clinical staff are available for face-to-face services with the patient

**CPT code 99484**

See CPT 2024 Professional Edition for complete code descriptors, instructions and guidelines.

# Behavioral Health in CPT®: Increasing Access Through Telemedicine

**Appendix P**  
Synchronous  
Real-Time Interactive  
Audio-Video Telemedicine  
Services

**Appendix T**  
*(effective Jan. 1, 2023)*  
Synchronous Real-Time  
Interactive Audio-Only  
Telemedicine Services

Behavioral Health Codes on the CMS Telemedicine List: 31% increase over last 4 years		
Subsection	March 2020	Calendar Year 2024 (effective Nov. 2023)
Preventive	2	2
Screening/Assessment	15	25
Treatment	11	19
Care Coordination	2	2
Total	40	58

# CPT® Codes for Behavioral Health: Uses Beyond Payment

## CPT®: Perception vs. Reality



**Medical Code Set Terminology Standard**



**Claims-Based Reporting**

The primary terminology for medical services and procedures.



**Fee-for-Service Payment**

Integral in the predominant fee-for-service payment system.



**Quality Measures**

Determine the scope of medical services included for measurement.



**Alternative Payment Models**

Determine the scope of medical services included in the model.



**Research**

Evaluation and assessment of quality, volume, cost.

**Coordination of Care/  
Patient Safety**

**Quality Measures—  
Category II Codes**

**Outcomes Research**

# CPT® Codes, Beyond Payment—Quality Measures

## Category II Codes

### What they are

Supplemental tracking codes

Used for Performance Measurement

### How to read them

#### Patient Management

**0545F**

Plan for follow-up care for major depressive disorder, documented (MDD ADOL)<sup>1</sup>

CPT code  
(ends in 'F')

Code descriptor

Related diseases/  
clinical condition

Measure  
developer



Explore the [Alphabetical Clinical Topics Listing](#) (formerly Appendix H)—a web-based, alphabetical listing of clinical conditions and topics with which the measures and codes are associated.



# CPT® Category II Codes related to Behavioral Health

## Patient Management

**0545F** Plan for follow-up care for major depressive disorder, documented (MDD ADOL)<sup>1</sup>

## Patient History

**1040F** DSM-5 criteria for major depressive disorder documented at the initial evaluation (MDD, MDD ADOL)<sup>1</sup>

**1181F** Neuropsychiatric symptoms assessed and results reviewed (DEM)<sup>1</sup>

**1182F** Neuropsychiatric symptoms, one or more present (DEM)<sup>1</sup>

**1183F** Neuropsychiatric symptoms, absent (DEM)<sup>1</sup>

**1490F** Dementia severity classified, mild (DEM)<sup>1</sup>

**1491F** Dementia severity classified, moderate (DEM)<sup>1</sup>

**1493F** Dementia severity classified, severe (DEM)<sup>1</sup>

**1494F** Cognition assessed and reviewed (DEM)<sup>1</sup>

## Physical Examination

**2060F** Patient interviewed directly on or before date of diagnosis of major depressive disorder (MDD ADOL)<sup>1</sup>

## Diagnostic/Screening Processes or Results

**3088F** Major depressive disorder, mild (MDD)<sup>1</sup>

**3089F** Major depressive disorder, moderate (MDD)<sup>1</sup>

**3090F** Major depressive disorder, severe without psychotic features (MDD)<sup>1</sup>

**3091F** Major depressive disorder, severe with psychotic features (MDD)<sup>1</sup>

**3092F** Major depressive disorder, in remission (MDD)<sup>1</sup>

**3093F** Documentation of new diagnosis of initial or recurrent episode of major depressive disorder (MDD)<sup>1</sup>

**3351F** Negative screen for depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)<sup>2</sup>

**3352F** No significant depressive symptoms as categorized by using a standardized depression assessment tool (MDD)<sup>2</sup>

**3353F** Mild to moderate depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)<sup>2</sup>

**3354F** Clinically significant depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)<sup>2</sup>

**3700F** Psychiatric disorders or disturbances assessed (Prkns)<sup>8</sup>

**3720F** Cognitive impairment or dysfunction assessed (Prkns)<sup>8</sup>

**3725F** Screening for depression performed (DEM)<sup>1</sup>

## Therapeutic, Preventive, or Other Interventions

**4060F** Psychotherapy services provided (MDD, MDD ADOL)<sup>1</sup>

**4062F** Patient referral for psychotherapy documented (MDD, MDD ADOL)<sup>1</sup>

**4063F** Antidepressant pharmacotherapy considered and not prescribed (MDD ADOL)<sup>1</sup>

**4064F** Antidepressant pharmacotherapy prescribed (MDD, MDD ADOL)<sup>1</sup>

**4065F** Antipsychotic pharmacotherapy prescribed (MDD)<sup>1</sup>

**4306F** Patient counseled regarding psychosocial and pharmacologic treatment options for opioid addiction (SUD)<sup>1</sup>

**4320F** Patient counseled regarding psychosocial and pharmacologic treatment options for alcohol dependence (SUD)<sup>5</sup>

**4525F** Neuropsychiatric intervention ordered (DEM)<sup>1</sup>

**4526F** Neuropsychiatric intervention received (DEM)<sup>1</sup>

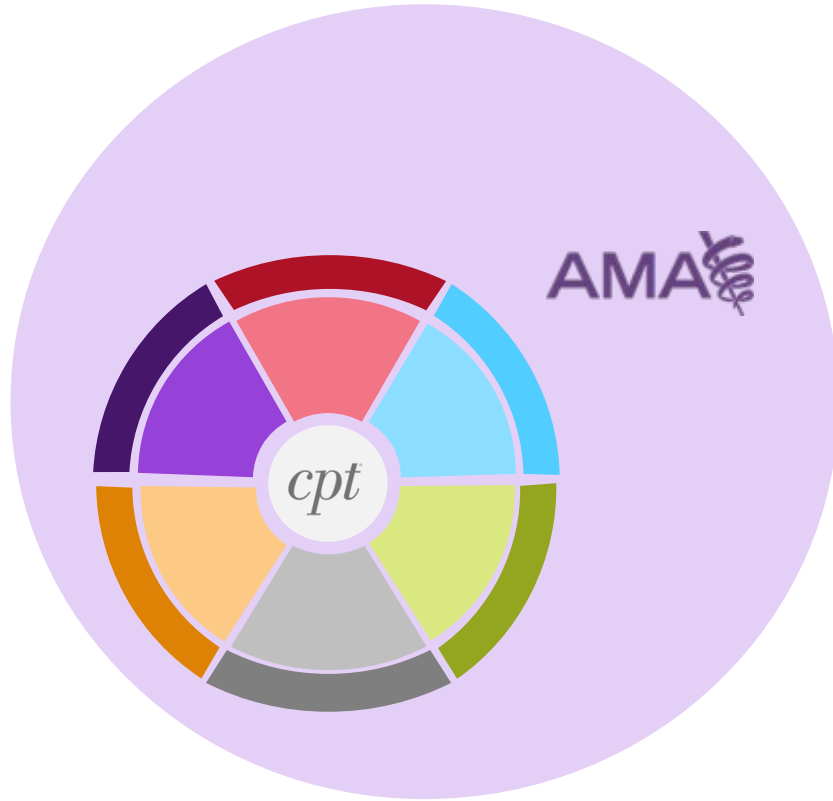
# CPT® Code Set—Evolving Into the Future

The AMA and the CPT Editorial Panel remain committed to evolving the code set to ensure it responds to the needs of physicians, health professionals, health systems, policymakers and payers.

Voice of the Customer work is in process:

- Value-based care
- Review other market perspectives/trends in comprehensive, collaborative care (e.g., Digital medicine / AI, SDOH, team-based care)

# AMA's Broader Efforts in Behavioral Health—BHI Initiative

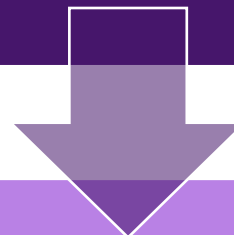


- CPT® codes for behavioral health are part of the AMA's broader efforts to empower health care organizations to overcome obstacles to timely, equitable access to treatment for their patients' behavioral, mental and physical health needs
- CPT code structure influences practice structure: AMA BHI Initiative

# Overview

AMA BHI Initiative  
**MISSION**

Catalyze effective and sustainable integration of behavioral and mental health care into physician practices



AMA BHI Initiative  
**VISION**

Identification and management of behavioral health conditions (mild/moderate) is a core competency of physician practices, not an exception

# Overarching Objectives

- Expand [education](#) to physicians (and their care teams) on the critical importance of behavioral health integration (BHI) and practical strategies for implementation, particularly for historically marginalized or minoritized populations
- Increase evidence-based [solutions](#) to overcoming barriers to timely, equitable whole-person care where the Collaborative has the capability to be a catalyst and have demonstrable impact
- Accelerate the [activation](#) of physician practices (and other pertinent partners such as employers and health plans) to adopt sustainable, equitable solutions for closing significant gaps and disparities in integrated behavioral health care delivery and payment
- Improve physician professional [satisfaction](#) by enabling a greater sense of joy, meaning and purpose to their careers knowing they can effectively support their patient's pressing behavioral health needs

# BHI Collaborative *(established in 2020)*

- American Academy of Child and Adolescent Psychiatry
- American Academy of Family Physicians
- **American Academy of Neurology**
- American Academy of Pediatrics
- American College of Obstetricians and Gynecologists
- **American College of Cardiology**
- American College of Physicians
- **American Gastroenterological Association**
- American Medical Association
- American Osteopathic Association
- American Psychiatric Association
- **American Society of Clinical Oncology**



# Building Blocks

- ❖ 8 elements that may fall on a spectrum from practice to practice but are integral to providing BHI






# AMA BH Coding Guide

Outlines key CPT® codes practices can use when administering behavioral health treatment and/or preventative services.

Codes are mapped to the BHI model continuum to help physicians quickly determine which codes might be most relevant to their practice.



## Behavioral Health Coding Resource

This resource outlines key CPT codes that physicians and their care team can use (as appropriate) in their [private practice](#) when administering behavioral health screening, treatment, and/or preventative services [[telemedicine-related codes highlighted with a T](#)]. Codes are mapped to the behavioral health integration (BHI) model continuum to help physicians quickly determine which sets of codes might be most relevant to their practice.

### CPT® Codes Across the BHI Continuum

Co-Location		Collaborative Care	
A	B	C	D
<b>Preventive Medicine</b> 99401, 99402, 99403, 99404, 99411, 99412	<b>Psychotherapy</b> 90832, 90833, 90834, 90836, 90837, 90838	<b>Adaptive Behavior services</b> 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158	<b>General Behavioral Health Integration Care Management</b> 99484
<b>Behavior Change Interventions</b> 99406, 99407, 99408, 99409	<b>Developmental / Behavioral Screening</b> 96127	<b>Health Behavior Assessment and Intervention</b> 96156, 96158, 96159, 96160, 96161, 96164, 96165, 96167, 96168, 96170, 96171	<b>Psychiatric Collaborative Care Management</b> 99492, 99493, 99494  <b>Cognitive Assessment and Care Plan Services</b> 99483

**Under Co-Location** the behavioral health specialist is physically located in a primary care clinic, or the primary care physician or other clinician is physically located in a mental health or substance use disorder treatment setting. The distinguishing feature here is physical proximity. Codes under Column A and Column B both fall under co-location.

**Column [A] Codes: Counseling Risk Factor Reduction and Behavioral Change Intervention** These codes are intended to be preventive in nature/used prior to formal diagnosis in the hopes of addressing issues before they become larger health issues. They do not require a large team to implement.

**Preventive Medicine**

- 99401, 99402 99403, 99404 (Individual)
- 99411, 99412 (Group)

**Behavior Change Interventions**

- 99406, 99407 Smoking and tobacco use cessation counseling visit [T](#)
- 99408, 99409 Alcohol and/or substance (other than tobacco) abuse structured screening, brief intervention (SBI) services [T](#)





# BHI Compendium

**\*\*Enhanced Copy  
released in May 2024\*\***

## Behavioral Health Integration Compendium

### THIS BEHAVIORAL HEALTH INTEGRATION COMPENDIUM

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This Compendium was developed based on the generous contributions of time and expertise by the following BHI Collaborative members:



A special thanks to BHI Collaborative member, American College of Obstetricians and Gynecologists (ACOG) for their additional insights and feedback.

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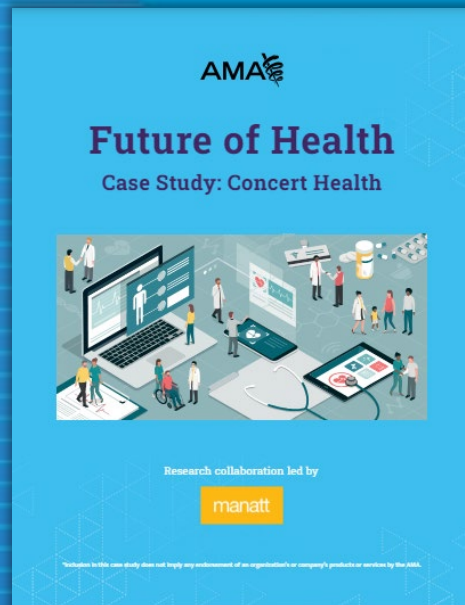
Serves as a tool for practices to learn about BHI and an implementation framework for how to make it effective for their practice and patients.



[Access the updated copy](#)

# AMA Future of Health Case Study: Concert Health

Virna Little, PsyD, CCO  
Co-founder and Special Advisory  
Concert Health

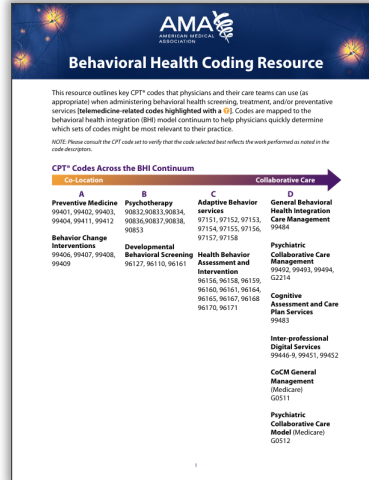


Click to access the  
case study

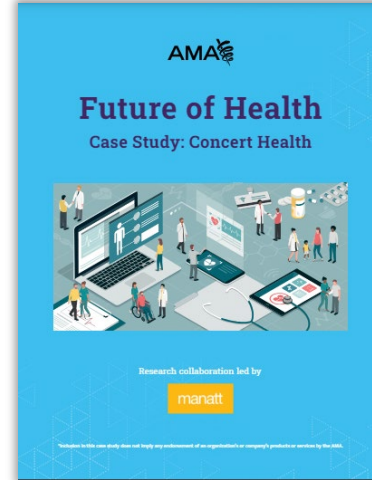


# Questions?

## For further insights, click to explore:



[AMA Behavioral Health Coding Guide](#)



[AMA Future of Health Case Studies](#)



[Behavioral Health Integration Compendium](#)

# Get involved!



## Attend the next CPT® Editorial Panel Meeting

- Sept. 19–21 (Albuquerque, NM & Virtual)
- **Register today** for the September Panel Meeting!



## Secure authoritative education at the CPT & RBRVS 2025 Annual Symposium

- Nov. 20–22 (Virtual)
- Prepare for next year and earn CEUs—**Register today** at early bird rates!



## Apply for a CPT Code

Help the CPT Editorial Panel and the AMA build the foundation for how health care procedures are tracked, reimbursed, and studied.

Submit code change applications online via the **CPT Smart App**.

# Get involved!



## AMA Physician Innovation Network (PIN)

Connecting physicians and entrepreneurs to collaborate on new digital health care solutions

[innovationmatch.ama-assn.org](https://innovationmatch.ama-assn.org)



## CPT® Developer Program

Offering access to AMA-published content from CPT during the crucial stages of development

[developer.ama-assn.org](https://developer.ama-assn.org)



## In Full Health

Seeking to advance equitable opportunities in health innovation investment, solution development and purchasing

[infullhealth.org](https://infullhealth.org)

# Next Steps



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**Join us for our next  
CPT® Webinar!**

Watch your inbox for registration details about our next CPT Webinar!



**Physicians' powerful ally in patient care**

# Appendix

Explore related AMA resources





# AMA Resources on Behavioral Health

- [Behavioral health coding guide](#)
- [Behavioral Health Integration \(BHI\) Collaborative](#)
- [BHI compendium](#)
- [Behavioral health integration in physician practices](#)

# AMA Resources on Value-based Care

- [What is value-based care?](#)
- [AMA Ed Hub module: What are the components of value-based care?](#)
- [Future of sustainable value-based care: Best practices for payment methods](#)
- [CPT® Webinar: Value-based care and the CPT code set](#), recorded Sept. 7, 2023