

Telehealth Modifier Use for OMH-licensed/Designated Programs During COVID-19 Emergency

Issued 3-25-2020

The following crosswalk shows the appropriate telehealth modifier for each unique rate code/procedure code combination. Use of the correct modifier is required when billing for telehealth services. Modifiers to be used when billing for Telehealth services include 95 and GT. Modifier 95 may only be appended to the specific services listed in Appendix P of the AMA's CPT Professional Edition 2019 Codebook. Note, modifier GT is only for use with those services for which modifier 95 cannot be used.

Program	Rate Code	Rate Code / Service Title	Px Code	Telehealth Modifier	
Assertive Community Treatment (ACT)	4508	ACT Intensive Full Payment	H0040	GT	
	4509	ACT Intensive Part Payment	H0040	GT	
	4511	ACT Inpatient	H0040	GT	
See detailed service list below:					
Continuing Day Treatment (CDT)	4310	Continuing Day Treatment Half Day 1-40	H2012	GT	
	4311	Continuing Day Treatment Half Day 41-64	H2012	GT	
	4312	Continuing Day Treatment Half Day 65+	H2012	GT	
	4315	Continuing Day Treatment Full Day 1-40	H2012	GT	
	4317	Continuing Day Treatment Full Day 41-64	H2012	GT	
	4318	Continuing Day Treatment Full Day 65+	H2012	GT	
	4325	Continuing Day Treatment Collateral	H2012	GT	
	4331	Continuing Day Treatment Group Collateral	H2012	GT	
	4337	Continuing Day Treatment Crisis	H2012	GT	
	4346	Continuing Day Treatment Pre-Admission	H2012	GT	
	4007	Brief Evaluation	90791	95	
Comprehensive Psychiatric Emergency Program (CPEP)	4008	Full Evaluation	90791	95	
	4009	Crisis Outreach Visit	S8485	GT	
	4010	Interim Crisis Visit	H0037	GT	
	4369	Monthly Rehabilitative Fee	H0044 H2018	GT	
Community Residences (CRs)	4370	Semi-Monthly Rehab fee - 1st half	H0044 H2018	GT	
	4371	Semi-Monthly Rehab Fee - 2nd half	H0044 H2018	GT	
	4389	State Op Adult CRS Full Month	H0044 H2018	GT	
	4390	State Op Adult CRS 1st half month	H0044 H2018	GT	
	4391	State Op Adult CRS 2nd half month	H0044 H2018	GT	
	4060	Full Day	H2012	GT	
	4061	Half Day	H2012	GT	
Day Treatment for Children	4062	Brief Day	H2012	GT	
	4063	Home Visit	H2012	GT	
	4064	Crisis Service	H2012	GT	
	4065	Pre-Admission Full Day	H2012	GT	
	4066	Collateral	H2012	GT	
	4067	Pre-Admission Half Day	H2012	GT	
	4349	Partial Hospitalization Regular - 4 hours	H0035	GT	
	4350	Partial Hospitalization Regular - 5 hours	H0035	GT	
	4351	Partial Hospitalization Regular - 6 hours	H0035	GT	
	4352	Partial Hospitalization Regular - 7 hours	H0035	GT	
Partial Hospitalization (PH)	4353	Partial Hospital Collateral - 1 hour	H0035	GT	
	4354	Partial Hospital Collateral - 2 hours	H0035	GT	
	4355	Partial Hospital Group Collateral - 1 hour	H0035	GT	
	4356	Partial Hospital Group Collateral - 2 hours	H0035	GT	
	4357	Partial Hospitalization Crisis - 1 hour	S8484	GT	
	4358	Partial Hospitalization Crisis - 2 hours	S8484	GT	
	4359	Partial Hospitalization Crisis - 3 hours	S8484	GT	
	4360	Partial Hospitalization Crisis - 4 hours	S8484	GT	
	4361	Partial Hospitalization Crisis - 5 hours	S8484	GT	
	4362	Partial Hospitalization Crisis - 6 hours	S8484	GT	
	4363	Partial Hospitalization Crisis - 7 hours	S8484	GT	
	4510	PROS Preadmission	H0002	GT	
	Personalized Recovery Oriented Services (PROS)	4520	PROS Comm Rehab Svcs 2-12 Units	H2019	GT
		4521	PROS Comm Rehab Svcs13-27 Units	H2019	GT
4522		PROS Comm Rehab Svcs 28-43 Units	H2019	GT	
4523		PROS Comm Rehab Svcs 44-60 Units	H2019	GT	
4524		PROS Comm Rehab Svcs 61+ Units	H2019	GT	
4525		PROS Clin Trmt Add-On	T1015	GT	
4526		PROS Int Rehab	H2018	GT	
4527		PROS Ongoing Rehab & Support	H2025	GT	
4531		Pre-admission - AH/NH/PC	H0002	GT	
4532		Enhanced CRS 2 Contact - AH/NH/PC	H2019	GT	
4533		Enhanced CRS 4 Contact - AH/NH/PC	H2019	GT	
4534		Intensive Rehabilitation - AH/NH/PC	H2018	GT	

Program	CPT Procedure - OMH Regulatory Name	CPT Codes	Telehealth Modifier
Clinic	Initial Assessment Diagnostic & Treatment Plan	90791	95
	Initial Assessment Diagnostic & Treatment Plan with Medical Services	90792	95
Non Hospital* Hospital	Psychiatric Assessment - 30 mins	99201-99205, 99212-99215	95
	Psychiatric Assessment - 30 mins - ADD ON	90833	95
	Psychiatric Assessment - 45-50 mins	99201-99205, 99212-99215	95
	Psychiatric Assessment - 45-50 mins - ADD ON	90836	95
	Psychiatric Consultation	99201-99205, 99212-99215	95
	Crisis Intervention - 15 min	H2011	GT
	Crisis Intervention - complex	S8484	GT
	Crisis Intervention - per diem	S8485	GT
	Injectable Med Admin with Monit & Edu	H2010	GT
	Telehealth Facility Fee (Only available for IOS Clinics)	Q3014	Not applicable
	Psychotropic Medication Treatment	99201-99205, 99212-99215	95
	Psychotherapy - Indiv 30 mins	90832	95
	Psychotherapy - Indiv 45 mins	90834	95
	Psychotherapy - Family 30 mins	90846	95
	Psychotherapy - Family/Client 1 hr	90847	95
	Psychotherapy - Family Group 1hr	90849	GT
	Psychotherapy - Group 1 hr	90853	GT
	School Based - Group <1 hr	90853	GT
	Developmental Testing - limited	96110	GT
	Developmental Testing - First Hour	96112	GT
	Developmental Testing - Additional 30 min	96113	GT
	Psychological Testing Evaluation - First Hour	96130	GT
	Psychological Testing Evaluation - Additional Hour	96131	GT
	Psychological Testing Admin and Scoring - First 30 Min	96136	GT
	Psychological Testing Admin and Scoring - Additional 30 Min	96137	GT
	Psychological Testing - Neurobehavioral First Hour	96116	GT
	Psychological Testing - Neurobehavioral Additional Hour	96121	GT
	Complex Care Management - 5 mins	90882	Not applicable
	Health Physicals	99392-99397	GT
	Health Monitoring - 15 mins	99401	GT
Health Monitoring - 30 mins	99402	GT	
Health Monitoring - 45 mins	99403	GT	
Health Monitoring - 60 mins	99404	GT	
Health Monitoring Group - 30 mins	99411	GT	
Health Monitoring Group - 60 mins	99412	GT	
Smoking Cessation Treatment - 3-10 mins; requires Dx code 305.1	99406	95	
Smoking Cessation Treatment - >10 mins; requires Dx code 305.1	99407	95	
Smoking Cessation Treatment (Group) - >10 mins; requires Dx code 305.1 (req HQ modifier)	99407-HQ	95	
Alcohol and/or Drug Screening	H0049	GT	
Alcohol and/or Drug, brief intervention, per 15 mins	H0050	GT	