



ADAPTIVE TESTING TECHNOLOGIES



REIMBURSEMENT GUIDELINES

For the CAT-MH™ and K-CAT™

Description	Private Payer (CPT)		Medicare (HCPCS)	
	Code	Estimated Payment	Code	Estimated Payment
Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument ¹	96160	\$4.68	-	-
Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g. AUDIT, DAST) and brief intervention, 15 to 30 minutes	99408	\$33.41	G0396	\$36.25
			G0397	\$71.42
Health and behavioral assessment (e.g., health-focused clinical interview, behavioral observations, psychophysical monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment (has to be connected with a non-psych somatic ICD9 dx) ²	96150	\$22.68	-	-
Annual Depression Screening, 15 minutes	99420	\$15.00	G0444	\$17.36
Annual Alcohol Misuse Screening, 15 minutes	99420	\$15.00	G0442	\$18.30
Preventive medicine counseling or risk factor reduction intervention(s) provided to an individual; approximately 15 minutes	99401	-	G0443	\$26.20
Positive Screen For Clinical Depression Using an Age Appropriate Standardized Tool and a Follow-Up Plan Documented	99420	\$15.00	G8431	-
No Documentation of Clinical Depression Screening Using an Age Appropriate Standardized Tool	99420	\$15.00	G8432	-
Screening for Clinical Depression Using an Age Appropriate Standardized Tool Not Documented, Patient Not Eligible/Appropriate	99420	\$15.00	G8433	-
Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument ³	96127	\$4.71	G0444	\$17.36

¹If intervention for alcohol or substance use (≥15 minutes) is also provided, report code 99408 based on time.

²For reassessment, and not an initial assessment, use CPT code 96151 (15 minutes, \$21.96).

³Use for both screening and follow-up of emotional and behavioral health conditions. Code 96127 is also applicable to assessments for conditions such as anxiety, attention-deficit disorders, and generalized psychosocial symptoms.

You should also note that CPT code 96161 covers perinatal health risk assessment for mental health screening.

Relevant ICD-10 Codes should also be used to specify the reason for utilizing the screen.

ICD Codes by Disorder	
Disorder	ICD-10-CM Code
Anxiety*	F41
Mania/hypomania*	F31
Depression*	F32
PTSD*	F43.1
Alcohol Dependence*	F10
Drug Dependence*	F11-F19
Suicidality	R45.851

***Note:** These codes alone should not be used for reimbursement purposes as there are multiple codes that contain a greater level of detail. For example, F31.11 for mild mania/hypomania and F31.12 for moderate.

The Patient Protection and Affordable Care Act (PPACA) entitles all Medicare beneficiaries to an Initial Preventive Physician Exam (IPPE) and subsequent annual wellness visit (AWV). Health professionals have a choice among various standardized screening tests including the CAT-MH™.

The CAT-MH™ automates and/or optimizes:

- Screening, Decision Support, and Parent-rated Monitoring for depression, anxiety, mania/hypomania, psychosis, substance use disorder, PTSD, and suicidality.
- Perinatal screening and measurement for depression, anxiety, and mania/hypomania.
- Personalized health advice and/or triage with other qualified professionals.
- Establishing a long term measurement-based care and monitoring.

Eligible Providers:

- The IPPE exam can be performed by a physician or qualified non-physician provider.
- An AWV may be rendered by a physician; a qualified non-physician provider (nurse practitioner, physician assistant, or clinical nurse specialist) or health professionals such as a health educator, registered dietitian, nutrition professional, and other licensed practitioner or by a team of medical professionals working under the direct supervision of a physician.

Coding and Reimbursement: Correct coding is essential to avoid denials for these preventive visits.

- The code for the IPPE is G0402 (preventive physical examination; face to face visit, services limited to new beneficiaries during the first 12 months of Medicare enrollment).
- The code for the initial AWV is G0438 (annual wellness visit, including personalized prevention plan services (PPPS), first visit). The subsequent AWV is coded as G0439. This is appropriate for telehealth (service code 02).
- Reimbursement for the G0438 has been established at the rate for a 99204; for the G0439, it is 99214.
- Reimbursement for the AWV is based on rendering the provider's National Provider Identification (NPI) number.