

## Internal Medicine Coding Alert

### Reader Question: Follow-Up for Patient on Antidepressant

Question: A patient came in for a follow-up visit after being prescribed an antidepressant medication. Should we use an E/M code or 90862? The insurance company denied 90862, saying it is for use by psychiatrists.

California Subscriber

Answer: You may want to appeal that decision with the insurance company.

The AMA states that any physician, regardless of specialty, can use any code from CPT. And Principles of CPT Coding supports your use of 90862 (Pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy). It says that "Code 90862 is reported when: a physician manages medication for the patient who is in psychotherapy with a nonprescribing colleague; a patient's condition is being effectively treated by psychotropic drugs alone; a physician is primarily managing a patient who has an organic-type disorder (e.g., senile dementia of the Alzheimer's type) with the use of medication. Generally, the patient does not receive other services from the physician at the encounter. If an E/M service is provided, the pharmacologic management is included in the E/M service ... The psychotherapy provided in conjunction with code 90862 is very minimal and supportive."

However, it would not be wrong to use an E/M code for this visit. If you use an E/M code, be sure to base your code selection on time because counseling and coordination of care has dominated your encounter (more than 50 percent). The physician must also document the total time of the encounter and provide a summary of the discussion/counseling session.