Codify
BY AAPC

Outpatient Facility Coding Alert

You Be the Coder: Know How to Use 90792

Question: How and when should code 90792 be billed?

New Mexico Subscriber

Answer: This code represents psychiatric diagnostic evaluation with medical services. In this procedure, the provider performs a psychiatric evaluation of the patient with the aim of making a diagnosis. In addition to the diagnostic evaluation, he also renders some additional medical services.

The provider performs a diagnostic evaluation that includes collecting information about present and past behaviour concerns as well as past family, medical, and social history. He may check the patient's vital signs, perform an examination and review of systems, and assess the patient's condition. The provider may order and interpret lab tests and imaging. The provider may also evaluate the patient for adverse drug reactions. He also performs diagnostic tests to work up the diagnoses. He may also interview the family members and friends of the patient to make a definite diagnosis. He then may prescribe medication and devise the psycho□social comprehensive treatment plan. He may also refer the patient for psychological, neuropsychological, developmental, or speech, language, and occupation therapy evaluations as a supplement for a full diagnostic evaluation. This code applies to new patients or to patients undergoing re□evaluation.

Remember: This code should be used once per day regardless of the number of sessions or time that the provider spends with the patient on the same day.