

Psychiatry Coding & Reimbursement Alert

Reader Question: Distinguish Services Provided by Clinical Social Workers With Appropriate Modifiers

Question: I recently took up additional responsibilities of coding for the psychiatry department in our facility as the previous person who was handling the work shifted to a different state. I was going through her previous files on record and saw some modifiers like \"AJ\" and \"AH\" being used for certain counseling procedures performed by various people in the department. Can you let me know what these modifiers stand for, when and how they need to be used?

New Orleans Subscriber

Answer: You might often see the modifiers \"AJ\" and \"AH\" if you are going through claims filed in the psychiatry department. These modifiers are HCPCS modifiers that are used with various CPT® codes for therapeutic procedures performed in your facility. The modifier \"AJ\" stands for \"Clinical Social Worker\" and is indicative that the CPT® code that is used for the procedure has been conducted by a clinical social worker who is qualified as per the guidelines laid down by Medicare to handle the services performed.

Similarly, the modifier \"AH\" stands for \"Clinical psychologist.\" When used with any CPT® code, it lets the payer know that a qualified clinical psychologist handled the services performed and reimbursements can be provided as per guidelines for payments laid down by CMS. If you fail to append the right modifier to the CPT® code, it may lead to incorrect payments and fraudulent claims.

Note that these modifiers are used to describe license-level of the clinical practitioners rendering a particular therapy or service, and proper documentation should be provided to enable the payer to know that all the guidelines regarding the practitioner and the level of service provided are being met to qualify for payments.

The modifiers \"AJ\" or \"AH\" should be placed in the field 24d of the CMS 1500 form and in the field 44 on a UB-04 form (HCFA 1450). The modifier should be placed after the CPT® code that is used to describe the services performed. For example, if your clinical psychologist provides a behavioral psychotherapy session in an office setting for a period of 20 minutes, you will report the service as 90804 (Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient) with modifier AH appended to the code.