

Psychiatry Coding & Reimbursement Alert

Reader Question: Know When Marital Counseling is a Covered Diagnosis

Question: If our psychiatrist is providing therapy for a husband and wife, how do I report the services provided by our clinician? The couple is sometimes seen together and sometimes seen separately.

Minnesota Subscriber

Answer: How you report the services will depend on the nature of the therapy and whether it is focused on a member of the couple as an individual or the couple as a family unit.

If one of the spouses is diagnosed with a psychiatric condition and therapy is medically or psychologically considered necessary, then psychotherapy provided to the patient should be reported. If the focus of the therapy was on the individual patient (e.g. in resolving his/her psychiatric problems along with handling any marital issues that have compounded or been created by the psychiatric condition) with peripheral involvement of the other spouse, you'll report one of the appropriate psychotherapy codes (e.g., 90832-90838) (based on time spent with the patient and with the other spouse) to cover the sessions. Here you can count time spent on counseling the other spouse also as the present psychotherapy codes include time spent with patient and/ or family member.

But, if the focus of the psychotherapy provided, in such an instance where one of the spouses has a covered diagnosis, was focused on counseling the family members of the patient and providing them information about how their interaction with the patient will benefit his/ her treatment, you'll have to use the family psychotherapy session codes, 90846 (Family psychotherapy [without the patient present]) or 90847 (Family psychotherapy [conjoint psychotherapy] [with patient present]) depending on whether or not the spouse was seen along with the patient.

However, if your psychiatrist is providing traditional marital counseling is aimed at resolving marital issues, you should not report a psychotherapy code, since such counseling is not psychotherapy, per se. In fact, there is no CPT® code specific to marital counseling, and Medicare and most other insurance carriers do not cover marriage counseling. If a carrier does cover it, ask them what service code they prefer you to report for the service, and consider appending a diagnosis of V61.10 (Counseling for marital and partner problems, unspecified). If the marriage counseling is not covered by insurance, it may be a patient responsibility, in which case you should consider billing the couple directly for your psychiatrist's time spent counseling them