

Psychiatry Coding & Reimbursement Alert

You Be the Coder: Reporting One Unit of 90847 For Each Family Member? Think Again

Question:Our psychiatrist recently counseled the family members of a patient. He talked to the members of the family one by one and then again counseled them as a group. What codes should I use to report the counseling to individual family members and to report the group counseling? I am thinking of reporting 90847 for the individual counseling provided to each member of the family and then report 90853 for the group therapy. Is this correct?

Dallas Subscriber

Answer: When reporting the counseling for family psychotherapy, you will report either 90846 or 90847 depending on whether or not the patient was present during the session. When reporting family psychotherapy codes, you will have to remember that you will only bill one unit of the code irrespective of the number of the persons in the family that your clinician spoke with. So, unlike what you have assumed, you cannot report 90846 (Family psychotherapy [without the patient present]) or 90847 (Family psychotherapy [conjoint psychotherapy] [with patient present]) for each member of the family that your clinician counseled. Instead, you will only bill one unit of the family therapy code for one calendar date of service when your clinician spoke to each of the family members of the patient.

You cannot report 90853 (Group psychotherapy [other than of a multiple-family group]) for the counseling that your clinician performed at the end with all the members of the family taking part in the session. You can only report 90853 when members of an active treatment group are taking part in the group psychotherapy session and not when members of the family of one patient are being counseled. In this case, this session too is part of the family therapy that is reported with an appropriate code from 90846 or 90847 depending on whether or not the patient was present.

Again, if the patient was present for the session with individual members of the family and for the group session, you cannot report it with two units of 90847. Also, if the patient was not at all present for the entire individual session or the group session, you cannot report two units of 90846.

If the patient was counseled individually and then not present during the group session with the rest of the family, you can report 90846 for the family psychotherapy without the patient present and a basic psychotherapy code, such as 90832 (Psychotherapy, 30 minutes with patient and/or family member), for the individual psychotherapy with the patient. Correct Coding Initiative (CCI) edits normally bundle the CPT® basic psychotherapy codes such as 90832 into 90846. However, as the modifier indicator for this edit is '1,' you can unbundle the codes with the use of a modifier. You will have to report modifier 59 (Distinct procedural service) or XE (Separate encounter) with 90832 as it is the column 2 code in the edit bundle.