

Substituted references to CPT for references to CPT-4 throughout; and in (a), rewrote the first sentence, and inserted a third sentence. Amended by R.2006 d.348, effective October 2, 2006. See: 38 N.J.R. 2007(a), 38 N.J.R. 4219(b).

Rewrote introductory paragraph of (a); in (a)1, inserted "/NJ FamilyCare"; in (b), substituted "his or her" for "his/her", deleted "MEDICAID" preceding "MAXIMUM FEE ALLOWANCE", and inserted "/NJ FamilyCare"; in (b)2, substituted "Medicaid/NJ FamilyCare" for "Medicaid's"; in (d), made minor changes to punctuation; in (d)1, substituted "and" for "&"; in (d)1ii, inserted "/NJ FamilyCare" in the table entries for "IND" and "N"; and in the introductory paragraph of (e) and in (e)1v, inserted "/NJ FamilyCare".

10:67-3.2 HCPCS Codes and reimbursement rates for psychological services (Level I)

IND	HCPCS Code	Maximum Fee Allowance		
		\$	\$	NS
N	90801	\$37.00		\$26.00
N	90804	\$19.00		\$13.00
N	90806	\$37.00		\$26.00
N	90847	\$37.00		\$26.00
N	90847-22	\$46.00		\$32.00
N	90853	\$ 8.00		\$ 6.00
N	90887	\$19.00		\$13.00
N	96100	\$37.00		\$26.00
N	96105	\$37.00		\$26.00
N	96111	\$37.00		\$26.00
N	96115	\$37.00		\$26.00
N	96117	\$37.00		\$26.00
N	96150	\$14.00		\$12.00
N	96151	\$14.00		\$12.00
N	96152	\$13.00		\$11.00
N	96153	\$ 5.00		\$ 4.00
N	96154	\$13.00		\$11.00
N	96155	\$12.00		\$10.00

Amended by R.1998 d.89, effective February 17, 1998. See: 29 N.J.R. 4615(a), 30 N.J.R. 734(a).

Deleted descriptions from existing codes and added new codes and fees.

Amended by R.1998 d.514, effective November 2, 1998.

See: 30 N.J.R. 2414(a), 30 N.J.R. 3961(b).

Changed HCPCS code 90843 to 90804 and code 90844 to 90806.

Amended by R.2006 d.348, effective October 2, 2006.

See: 38 N.J.R. 2007(a), 38 N.J.R. 4219(b).

Added table entries for HCPCS Codes 96150 through 96155.

10:67-3.3 HCPCS Code qualifiers for psychological services

Code	Narrative
90801	Initial Comprehensive Psychiatric Evaluation QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 50 minutes of face-to-face contact with the patient or family member. No more than one claim is reimbursable per the same patient, per the same physician, per year.
90804	Individual Psychotherapy—approximately 20 to 30 minutes face-to-face with the patient QUALIFIER: This code requires, for reimbursement purposes, a minimum of 20 minutes of face-to-face contact with the patient or family member.
90806	Individual Psychotherapy—approximately 45 to 50 minutes face-to-face with the patient QUALIFIER: This code requires, for reimbursement purposes, a minimum of 45 minutes of face-to-face contact with the patient or family member.

Code	Narrative
90847	Family Therapy—50 minute session QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 50 minutes of face-to-face contact with the patient or family member(s).
90847 22	Family Therapy—80 minute session QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 80 minutes of face-to-face contact with the patient or family member(s).
90853	Group psychotherapy by a psychologist (other than of a multiple family group) QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 90 minutes per session. One unit equals 90 minutes for each person in the group with the maximum of eight persons in the group.
90887	Family Conference—25 minute session QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This procedure code must be used in conjunction with the treatment of the patient. This code requires, for reimbursement purposes, a minimum of 25 minutes of direct personal clinical involvement with the patient or family member(s). The CPT narrative otherwise remains applicable.
96100	Psychological testing with a written report per hour. QUALIFIER: The rate per hour includes time for interpretation and reporting the results of the psychological testing, including the cost of administration of the test and the scoring.
96105	Assessment of aphasia with a written report per hour. QUALIFIER: The rate per hour includes time for interpretation and reporting the results of the psychological testing, including the cost of administration of the test and the scoring.
96111	Extended developmental testing with a written report per hour. QUALIFIER: The rate per hour includes time for interpretation and reporting the results of the psychological testing, including the cost of administration of the test and the scoring.
96115	Neurobehavioral status exam with a written report per hour. QUALIFIER: The rate per hour includes time for interpretation and reporting the results of the psychological testing, including the cost of administration of the test and the scoring.
96117	Neuropsychological testing battery with a written report per hour. QUALIFIER: The rate per hour includes time for interpretation and reporting the results of the psychological testing, including the cost of administration of the test and the scoring.
96150	Health and behavior assessment (for example, health-focused clinical interview, behavioral observations, psychophysiological monitoring and health-oriented questionnaires), each 15 minutes of face-to-face contact with the patient or family member; initial assessment QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 45 minutes of face-to-face contact with the patient or family member(s).
96151	Health and behavior re-assessment, each 15 minutes of face-to face contact with the patient or family member(s)

Code	Narrative
	<p>QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 30 minutes of face-to-face contact with the patient or family member(s).</p>
96152	<p>Health and behavior intervention, each 15 minutes of face-to-face contact with the patient</p> <p>QUALIFIER: This code requires, for reimbursement purposes, a minimum of 15 minutes of face-to-face contact with the patient or family member.</p>
96153	<p>Health and behavior intervention, each 15 minutes of contact with a group (two or more patients, other than a multiple family group)</p> <p>QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 30 minutes per session. One unit equals 15 minutes for each person in the group, with a maximum of eight persons in the group.</p>
96154	<p>Health and behavior intervention, each 15 minutes, with a family member (with the patient present)</p> <p>QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 30 minutes of face-to-face contact with the patient and family member(s). One unit equals 15 minutes for each person in the group.</p>
96155	<p>Health and behavior intervention, each 15 minutes, with a family member (without the patient present)</p> <p>QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 30 minutes of face-to-face contact with the family member(s). One unit equals 15 minutes for each person in the group.</p>

New Rule, R.1998 d.89, effective February 17, 1998.

See: 29 N.J.R. 4615(a), 30 N.J.R. 734(a).

Amended by R.1998 d.514, effective November 2, 1998.

See: 30 N.J.R. 2414(a), 30 N.J.R. 3961(b).

Changed HCPCS code 90843 to 90804 and code 90844 to 90806 and rewrote corresponding narratives.

Amended by R.2006 d.348, effective October 2, 2006.

See: 38 N.J.R. 2007(a), 38 N.J.R. 4219(b).

Inserted “NJ FamilyCare”, “(s)” following “member” and commas following “requires” and “purposes” throughout; in table entry 90801, substituted “FamilyCare” for “KidCare”; and added table entries for HCPCS Codes 96150 through 96155.

APPENDIX

FISCAL AGENT BILLING SUPPLEMENT

AGENCY NOTE: The Fiscal Agent Billing Supplement is appended as part of this chapter but is not reproduced in the New Jersey Administrative Code. When revisions are made to the Fiscal Agent Billing Supplement, replacement pages will be distributed to providers and copies will be filed with the Office of Administrative Law. For a copy of the Fiscal Agent Billing Supplement, access www.njmms.com or write to:

Unisys Provider Services Unit
PO Box 4804
Trenton, New Jersey 08650-4804

or contact:

Office of Administrative Law
Quakerbridge Plaza, Building 9
PO Box 049
Trenton, New Jersey 08625-0049

Amended by R.2006 d.348, effective October 2, 2006.

See: 38 N.J.R. 2007(a), 38 N.J.R. 4219(b).

In the Agency Note, deleted “/manual” following “chapter” and inserted “access www.njmms.com or”.