

# BRIEF EMOTIONAL/BEHAVIORAL ASSESSMENT (96127)

## DISCLAIMER

This is provided as a tool, effective 1/1/19, to address some payers' coverage requirements for 96127. We make no representation as to any payer policies other than those identified herein. We recommend you get confirmation from your own coding experts.

### CPT CODE

**96127**

"Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, *per standardized instrument*" (meaning that you can bill a separate charge for each test administered; however, some payers, i.e., Medicare, limit the number of tests which can be billed per DOS; see below).

### DIAGNOSIS CODES

- As of January 2019, there are no published national or local Medicare carrier policies providing required dx codes for 96127.
- United Healthcare wants ICD-10 Diagnosis Code Z13.31 or Z13.32 to be billed with 96127 for a depression screening.
- Aetna wants ICD-10 Diagnosis Code Z13.89 to be billed in order to bill 96127 for a depression screening.
- Premera BCBS allows diagnosis codes Z13.30, Z13.31, Z13.32, Z13.39 and Z13.89 to be billed with 96127 for depression screenings.

### MEDICARE COVERAGE INFORMATION

- Noridian Healthcare Solutions has indicated that the following tests meet the definition of 96127: Beck Depression Inventory (BDI), Sheehan Disability Scale (SDS), and the Taylor-Johnson Temperament Analysis (T-JTA) personality test and mood disorder questionnaire.
- According to the Medicare MUE Database Version 1/1/2019, 96127 has an MUE of 2, which means that only 2 units of 96127 can be billed to Medicare on a given date of service.
- Per the 2019 Medicare Physician Fee Schedule, 96127 has a PC/TC Indicator of "3" which identifies stand-alone codes that describe only the technical component (such as staff and equipment costs) of a selected diagnostic test, which means Medicare is not paying for any provider time, only the test costs. For Medicare, this code can be billed even when the physician is not in the office because the incident to rules are not applicable to codes which have their own benefit category, such as diagnostic tests. See Section 60 of Chapter 15 of the Medicare Benefit Policy Manual.
- Per the Medicare Physician Fee Schedule for 2019, the average national allowable for 96127 is \$5.41.
- Check your specific Medicare carrier, as each carrier's rules are different.

### AMERICAN MEDICAL ASSOCIATION (AMA) INFORMATION

- Per the AMA, 96127 describes the administration of a standardized behavioral and emotional assessment instrument, which serves as a mechanism to identify and/or measure emotional/behavioral symptom presence or severity. The assessment is not diagnostic of a specific condition or disorder; however, it may indicate the need for in-depth assessment or further intervention. Examples of assessment instruments include an ADHD rating scale or an anxiety or depression rating scale or inventory. These scales may be used over periods of time to assess response management.

- CPT 96127 has been established to report the administration of a standardized behavioral and emotional assessment instrument primary for, but not limited to, children and adolescents. This assessment serves as a mechanism to identify emotional and behavioral conditions that previously may have been underestimated and/or undetected in any age population.

## COMMERCIAL PAYER COVERAGE

- The rules of each payer vary, so verify your payers' policies.
- Several commercial policies such as Aetna, UnitedHealthcare, Premera and some BCBS Carriers have preventative care policies which indicate that 96127 can be billed for depression screenings.
- PerformCare has indicated that 96127 should be used to report a brief assessment for ADHD, depression, suicidal risk, anxiety, substance abuse, eating disorders, etc.
- PerformCare has indicated that the following common screening instruments can be billed under 96127 without prior authorization: ASQ:SE, ASAS, BYI-II, BASC-2, BRIEF, BITSEA, CARS, PSC, SCARED, SCQ, SDQ, CRAFFT, AUDIT, BDI, C-SSRS, DAST-10, GAD-7, GDS, LEC, PHQ-9, PHQ-2. This is not an exhaustive list.
- PerformCare allows a limit of four (4) instruments per day.

## REFERENCES

Noridian Healthcare Solutions Mental Health – Part 2 Documentation and CERT Presentation July 2017

CMS CY 201 Physician Fee Schedule: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/>

AMA CPT Assistant Article, August 2015, Central Nervous System Assessments/Tests

2015 CPT Changes: *An Insider's View*

Social Security Act Section 1861(s)(3); Medicare Benefit Policy Manual, Chapter 15, Section 60.

<http://www.aetna.com/healthcare-professionals/documents-forms/depression-program.pdf>

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/comm-medical-drug/preventive-care-services.pdf>

<https://pa.performcare.org/pdf/providers/resources-information/policies/outpatient-other/020116-cpt-code-emotional-behavioral-assessment.pdf>

<https://www.premera.com/medicalpolicies/10.01.523.pdf>