

Highmark BlueShield Billing Highlights

PSYCHIATRIC/PSYCHOLOGICAL/SUBSTANCE ABUSE SEPARATELY BILLED OUTPATIENT SERVICES

LOCATOR 4: Type of Bill

- 1st digit always = 1
- 2nd digit always = 3
- 3rd digit = 1

LOCATOR 6: Statement Covers Period - required

The “**From**” and “**Through**” dates that correspond to the dates of service.

LOCATOR 42: Revenue Codes – required

- 0900 – Psychiatric/Psychological Treatments
- 0901 - Electroshock Treatment
- 0902 – Milieu Therapy
- 0903 – Play Therapy
- 0904 – Activity Therapy
- 0909 – Psychiatric/Psychological Treatments/Other
- 0910 – Psychiatric/Psychological Services
- 0911 - Psychiatric/Psychological Services/Rehabilitation
- 0912 - Psychiatric/Psychological/Intensive
- 0913 - Psychiatric/Psychological/Less Intensive
- 0914 - Psychiatric/Psychological/Individual Therapy
- 0915 - Psychiatric/Psychological/Group Therapy
- 0916 - Psychiatric/Psychological/Family Therapy
- 0917 - Psychiatric/Psychological/Bio Feedback
- 0918 - Psychiatric/Psychological/Testing
- 0919 - Psychiatric/Psychological/Other
- 0949 – Other Therapeutic Services

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PSYCHIATRIC/PSYCHOLOGICAL/SUBSTANCE ABUSE SEPARATELY BILLED OUTPATIENT SERVICES (Cont'd)

LOCATOR 44: HCPCS/Rate/HIPPS Code – Required

90801 Psychiatric Diagnostic Interview Examination
90802 Interactive Psychiatric Diagnostic Interview Examination
90804 Individual Psychotherapy 20 - 30 minutes
90805 Individual Psychotherapy 20 - 30 minutes with E&M
90806 Individual Psychotherapy 45 - 50 minutes
90807 Individual Psychotherapy 45 - 50 minutes with E&M
90808 Individual Psychotherapy 75 - 80 minutes
90809 Individual Psychotherapy 75 - 80 minutes with E&M
90810 Individual Psychotherapy, interactive, 20 - 30 minutes
90811 Individual Psychotherapy, interactive, 20 - 30 minutes w/E&M
90812 Individual Psychotherapy, interactive, 45 - 50 minutes
90813 Individual Psychotherapy, interactive, 45 - 50 minutes w/E&M
90814 Individual Psychotherapy, interactive, 75 - 80 minutes
90815 Individual Psychotherapy, interactive, 75 - 80 minutes w/E&M
90816 Individual Psychotherapy 20 - 30 minutes
90817 Individual Psychotherapy 20 - 30 minutes with E&M
90818 Individual Psychotherapy 45 - 50 minutes
90819 Individual Psychotherapy 45 - 50 minutes with E&M
90821 Individual Psychotherapy 75 - 80 minutes
90822 Individual Psychotherapy 75 - 80 minutes with E&M
90823 Individual Psychotherapy, interactive, 20 - 30 minutes
90824 Individual Psychotherapy, interactive, 20 - 30 minutes w/E&M
90826 Individual Psychotherapy, interactive, 45 - 50 minutes
90827 Individual Psychotherapy, interactive, 45 - 50 minutes w/E&M
90828 Individual Psychotherapy, interactive, 75 - 80 minutes
90829 Individual Psychotherapy, interactive, 75 - 80 minutes w/E&M
90846 Family Psychotherapy, without patient
90847 Family conjoint psychotherapy
90849 Multiple-family group psychotherapy
90853 Group psychotherapy
90857 Interactive group psychotherapy
90862 Pharmacological management
90865 Narcosynthesis for psychiatric diagnostic and therapeutic purposes
90870 ECT: single seizure, w/monitoring
90871 ECT: multiple seizures, per day
90875 Individual psycho physiological therapy, 20 - 30 minutes
90876 Individual psycho physiological therapy, 45 - 50 minutes
90880 Hypnotherapy
96100 Psychological testing, per hour
96105 Assessment of aphasia, with interpretation and report, per hour
96110 Developmental testing, limited w interpretation and report

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PSYCHIATRIC/PSYCHOLOGICAL/SUBSTANCE ABUSE SEPARATELY BILLED OUTPATIENT SERVICES (Cont'd)

LOCATOR 44: HCPCS/Rate/HIPPS Code – Required (Cont'd)

96111 Developmental testing, extended w interpretation and report, per hour
96115 Neurobehavioral status exam w interpretation and report, per hour
96117 Neuropsychological testing battery w interpretation & report, per hour
99241 Office Consultation: Focused: straightforward
99242 Office Consultation: Expanded: straightforward
99243 Office Consultation: Detailed: low complexity
99244 Office Consultation: Comprehensive: moderate complexity
99245 Office Consultation: Comprehensive: high complexity
99281 Emergency Room Visit
99282 Emergency Room Visit
99283 Emergency Room Visit
99284 Emergency Room Visit
99285 Emergency Room Visit

One of the following Professional Credential **Modifier** Codes is **required**:

AM – Psychiatrist
AH – Psychologist
AJ – Master's Degree Prepared Therapist, Social Worker or Counselor
GF – Pyschiatric CRNP

LOCATOR 46: Service Units - required

Each date of service must be billed as a separate line item.

LOCATOR 50: Payer Name – required

For paper UB claim submission enter **Highmark 378**.

LOCATOR 56: National Provider Identifier

Required for providers on or after the mandated HIPAA National Provider Identifier Implementation date.

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LOCATOR 67: Principal Diagnosis Code and Present on Admission

In order for a claim to be classified as Substance Abuse or Mental Health one of the following ICD-9-CM diagnosis codes is **required**:

29000 – 29090 Mental Health
29100 – 29290 Mental Health
29300 – 30290 Mental Health
30300 – 30593 Substance Abuse
30600 – 3190 Mental Health
33100 – 33100 Mental Health

The POA is not required at this time.

LOCATOR 76: Attending Physician – required

Until the mandated HIPAA date for the National Provider Identifier (NPI), Highmark will accept either NPI or UPIN. On paper submitted claims report the appropriate qualifier identifying the number being reported:

- 1G = Provider UPIN number
- G2 = Provider commercial number
- OB = State License Number

LOCATOR 81: Code-Code Field-Situational

This field may be used to report additional codes related to a form locator.

NOTE: Taxonomy number is not required, but encouraged for proper enumeration and payment of claims. Use qualifier B3 when reporting taxonomy.

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NOTE: Always bill substance abuse treatment services and detoxification services on separate claims. If more than one classification appears on the claim, the processing system will be unable to assign the single classification code it needs in order to pay the claim correctly. Reference Facility Bulletin PSYCH-2002-00-C or ADR-2002-001-C for billing guidelines.

REMINDER: Billing Highlights serve only as a tip sheet for some Locator information needed on UB claim submission. Reference the Highmark Facility Billing Reference Manual for Highmark's complete locator requirements. The official UB-04 Data Specifications Manual is available through the National Uniform Billing Committee (NUBC.org).

