

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
 QUALITY ASSURANCE UNIT
 TELEPHONE AND TELEHEALTH PROCEDURE CODES DURING THE COVID-19 CRISIS
DIRECTLY OPERATED ONLY**

Telephone Procedure Codes

Green bold italics indicates recently added (4/6/20), blue bold italics indicates added (3/23/20), orange bold italics indicates added (4/13/20), and red bold italics indicates added (5/5/20).

Procedure Code & Modifiers		Definition
Medi-Cal Administrative Activities		
1	SC	MAA NOT DISCOUNTED MCL OUTREACH PHONE
1	HK SC	MAA MCL OUTREACH CLT SPECIFIC PHONE
11	SC	MAA REFER CRISIS NON-OPEN CASES PHONE
11	HK SC	MAA REFER IN CRISIS CLT SPECIFIC PHONE
21	SC	MAA SPMP CASE MGMT NON-OPEN CASE PHONE
21	HK SC	MAA SPMP CASE MGMT CLT SPECIFIC PHONE
31	SC	MAA NON SPMP CASE MGMT NON-OPEN PHONE
31	HK SC	MAA NON SPMP CASE MGMT CLT SPEC PHONE
Community Outreach Services		
200	SC	COS - MENTAL HEALTH PROMOTION TELE
200	SC HK	COS - MENTAL HEALTH PROMOTN TO CLNT/TELE
231	SC	COS - COMMUNITY CLIENT SERVICES TELE
231	SC HK	COS - COMMUNITY CLIENT SRVC TO CLNT/TELE
Crisis Intervention		
H2011	SC	CRISIS INTERVENTION: PHONE
Mental Health Services		
90791	SC	PSYCH DIAGNOSTIC EVAL PHONE
90792	SC	PSYCH DIAG EVAL W/MED PHONE
H2000	SC	COMP MULTIDISCIPLINARY EVAL PHONE
T1001	SC	NURSING ASSESSMENT-EVAL PHONE
90887	SC	COLLATERAL PHONE
90887	HE HQ SC	GROUP COLLATERAL PHONE
G9007	SC	CASE CONFERENCE ATTENDANCE: PHONE
H0032	SC	PLAN DEVELOPMENT: PHONE
90839	SC	PSYCHOTHERAPY CRISIS PHONE
90847	SC	FAMILY THERAPY WITH CLT PHONE
90847	HE HQ SC	GROUP FAMILY THERAPY PHONE
90849	SC	GROUP THERAPY-MULTI FAMILY PHONE
90853	SC	GROUP THERAPY PHONE
H0046	SC	INDIVIDUAL PSYCHOTHER-PHONE
H2015	HE HQ SC	GROUP REHAB PHONE
H2015	SC	INDIVIDUAL REHAB SVC: PHONE
H2015	HK SC	INTENSIVE HOME BASED SERVICES TELEPHONE

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
QUALITY ASSURANCE UNIT
TELEPHONE AND TELEHEALTH PROCEDURE CODES DURING THE COVID-19 CRISIS
DIRECTLY OPERATED ONLY

Telephone Procedure Codes (continued)

Green bold italics indicates recently added (4/6/20), blue bold italics indicates added (3/23/20), orange bold italics indicates added (4/13/20), and red bold italics indicates added (5/5/20).

Procedure Code & Modifiers		Definition
Mental Health Services (continued)		
H2023	SC	SUPPORTED EMPLOYMENT PHONE
H2019	SC	THERAPEUTIC BEHAV SERV: PHONE
96105	SC	PSYCH TESTING Assessment - PHONE
96110	SC	PSYCH TESTING Development Screening - PHONE
96112	SC	PSYCH TESTING Development Testing - PHONE
96116	SC	PSYCH TESTING Neurobehavioral Status Exam - PHONE
96125	SC	PSYCH TESTING Std Cognitive Perform - PHONE
96130	SC	PSYCH TESTING Eval - PHONE
96132	SC	PSYCH TESTING Neuro Eval - PHONE
96136	SC	PSYCH TESTING Admin Scoring - PHONE
Medication Support Services		
H2010	SC	CMPREHNSV MEDICATION SVC: PHONE
Targeted Case Management		
T1017	SC	TARGETED CASE MGMT: PHONE
T1017	HK SC	INTENSIVE CARE COORDINATION TELEPHONE

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
 QUALITY ASSURANCE UNIT
 TELEPHONE AND TELEHEALTH PROCEDURE CODES DURING THE COVID-19 CRISIS
DIRECTLY OPERATED ONLY

Telehealth Procedure Codes

Green bold italics indicates recently added (4/6/20), blue bold italics indicates added (3/23/20), orange bold italics indicates added (4/13/20), and red bold italics indicates added (5/5/20).

Procedure Code & Modifiers		Definition
Medi-Cal Administrative Activities		
1	GT	MAA NOT DISCOUNTED MCL OUTREACH TELEPSY
1	HK GT	MAA MCL OUTREACH CLT SPECIFIC TELEPSY
11	GT	MAA REFER CRISIS NON-OPEN CASES TELEPSY
11	HK GT	MAA REFER IN CRISIS CLT SPECIFIC TELEPSY
21	GT	MAA SPMP CASE MGMT NON-OPEN CASE TELEPSY
21	HK GT	MAA SPMP CASE MGMT CLT SPECIFIC TELEPSY
31	GT	MAA NON SPMP CASE MGMT NON-OPEN TELEPSY
31	HK GT	MAA NON SPMP CASE MGMT CLT SPEC TELEPSY
Community Outreach Services		
200	GT	COS - MENTAL HEALTH PROMOTION TELEPSY
200	GT HK	COS - MENTAL HEALTH PROMOTN TO CLNT/TELEPSY
231	GT	COS - COMMUNITY CLIENT SERVICES TELEPSY
231	GT HK	COS - COMMUNITY CLIENT SRVC TO CLNT/TELEPSY
Crisis Intervention		
H2011	GT	CRISIS INTERVENTION: TELEPSY
Mental Health Services		
90791	GT	PSYCH DIAGNOSTIC EVAL-TELEPSY
90792	GT	PSYCH DIAG EVAL W/MED - TELEPSYCH
H2000	GT	Comp Multidisciplinary Eval Telepsy
T1001	GT	Nursing Assessment-Eval Telepsy
90887	GT	COLLATERAL - TELEPSY
90887	HE HQ GT	GROUP COLLATERAL - TELEPSY
H0032	GT	PLAN DEVELOPMENT TELEPSYCH
H0046	GT	PSYCHOTHERAPY 0-15 MIN FF TELEPSY
90832	GT	PSYCHOTHER 30MIN FF-TELEPSY
90834	GT	PSYCHOTHER 45MIN FF-TELEPSY
90837	GT	PSYCHOTHER 60MIN FF-TELEPSY
90839	GT	PSYCHTHER FOR CRISIS-TELEPSY
90847	GT	FAMILY THERAPY WITH CLT - TELEPSY
90847	HE HQ GT	GROUP FAMILY THERAPY - TELEPSY
90849	GT	GROUP THERAPY-MULTI FAMILY TELEPSY
90853	GT	GROUP THERAPY - TELEPSY
H2015	HE HQ GT	GROUP REHAB - TELEPSY
H2015	HK GT	INTENSIVE HOME BASED SERVICES TELEPSYCH
H2015	GT	INDIVIDUAL REHAB - TELEPSY

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
 QUALITY ASSURANCE UNIT
 TELEPHONE AND TELEHEALTH PROCEDURE CODES DURING THE COVID-19 CRISIS
DIRECTLY OPERATED ONLY**

Telehealth Procedure Codes (continued)

Green bold italics indicates recently added (4/6/20), blue bold italics indicates added (3/23/20), orange bold italics indicates added (4/13/20), and red bold italics indicates added (5/5/20).

Procedure Code & Modifiers		Definitions
Mental Health Services (continued)		
H2023	GT	SUPPORTED EMPLOYMENT: TELEPSY
<i>H2019</i>	<i>GT</i>	<i>TBS TELEPSY</i>
<i>G9007</i>	<i>GT</i>	<i>CASE CONFERENCE ATTENDANCE - TELEPSY</i>
<i>96105</i>	<i>GT</i>	<i>PSYCH TESTING Assessment - TELEPSY</i>
<i>96110</i>	<i>GT</i>	<i>PSYCH TESTING Development Screening - TELEPSY</i>
<i>96112</i>	<i>GT</i>	<i>PSYCH TESTING Development Testing - TELEPSY</i>
<i>96116</i>	<i>GT</i>	<i>PSYCH TESTING Neurobehavioral Status Exam - TELEPSY</i>
<i>96125</i>	<i>GT</i>	<i>PSYCH TESTING Std Cognitive Perform - TELEPSY</i>
<i>96130</i>	<i>GT</i>	<i>PSYCH TESTING Eval - TELEPSY</i>
<i>96132</i>	<i>GT</i>	<i>PSYCH TESTING Neuro Eval - TELEPSY</i>
<i>96136</i>	<i>GT</i>	<i>PSYCH TESTING Admin Scoring - TELEPSY</i>
Medication Support Services		
99201	GT	E&M OP,NEW CLIENT,10-19MIN TELEPSY
99202	GT	E&M OP,NEW CLIENT,20-29MIN TELEPSY
99203	GT	E&M OP,NEW CLIENT,30-44MIN TELEPSY
99204	GT	E&M OP,NEW CLIENT,45-59MIN TELEPSY
99205	GT	E&M OP,NEW CLIENT,60+MIN TELEPSY
99212	GT	E&M OP,ESTAB CLIENT,10MIN TELEPSY
99213	GT	E&M OP,ESTAB CLIENT,15-24MIN TELEPSY
99214	GT	E&M OP,ESTAB CLIENT,25-39MIN TELEPSY
99215	GT	E&M OP,ESTAB CLIENT,40+MIN TELEPSY
H2010	GT	CMPREHNSV MEDICATION SVC: TELEPSY
Targeted Case Management		
T1017	GT	TARGETED CASE MANAGEMENT - TELEPSY
T1017	HK GT	INTENSIVE CARE COORDINATION TELEPSYCH