

PROVIDER BULLETIN

No. 13-22

Date: April 3, 2013

TO: Medicaid Behavioral Health Providers

FROM: Vivianne M. Chaumont, Director 
Division of Medicaid & Long-Term Care

BY: Lowell Sedlacek – Program Specialist
Division of Medicaid and Long-Term care

RE: Clarification regarding billing Current Procedural Terminology (CPT) service codes 90791/90792 and Evaluation/Management services on the same day.

Please share this information with administrative, clinical, and billing staff.

Effective January 1, 2013, providers may only report psychiatric diagnostic evaluation CPT codes 90791 or 90792 once per day for the same patient. A provider may not bill for a 90791 or 90792 service for a patient and an evaluation management (E/M) service performed by that same provider for the same patient on the same day. Medicaid will deny or recover payment of evaluation management services that do not meet these guidelines.

Providers are responsible for following guidelines for reporting Current Procedural Terminology (CPT) codes.

If you have further questions or concerns about this information, please contact Lowell Sedlacek at (402) 471-1920 or e-mail at Lowell.sedlacek@nebraska.gov