AMERICAN PSYCHOLOGICAL ASSOCIATION SERVICES, INC.

PAYERS GUIDE

Utilizing Interprofessional Telephone/ Internet/Electronic Health Record Consultations CPT® Codes for Psychologists

Interprofessional Telephone/Internet/Electronic Health Record Consultation CPT codes have recently changed and will go into effect January 1, 2023. Because the service covered by these codes is EFFICIENT, ECONOMICAL, and EFFECTIVE, **it is imperative to reimburse psychologists for this work.**

What are Interprofessional Telephone/Internet/Electronic Health Record Consultation Services?

The interprofessional Telephone/Internet/Electronic Health Record Consultation CPT codes 99446–99449 and 99451 were created in 2014 to capture the time spent by a consultant who is not in direct contact with the patient at the time of service. An interprofessional telephone/internet consultation (ITC) is defined as an assessment and management service in which a patient's treating provider (e.g., primary or qualified health professional [QHP]) requests the opinion and/or treatment advice of a consultant with specific specialty expertise to assist the treating physician/QHP in the diagnosis and/or management of the patient's condition without the need for the patient's face-to-face contact with the consultant.

In January 2023, these codes will now have "or other qualified health care professional" added to the code descriptors, which clarifies the language to allow psychologists who provide assessment and management services conducted through telephone, internet, or electronic health record consultations furnished when their opinion and/or treatment advice is requested to assist with the diagnosis and/or management of the patient's condition. These services do not require the patient to have face-to-face contact with the consulting physician or qualified healthcare professional. **The revisions made to the code descriptors will eliminate federal and private payer confusion regarding a psychologist's eligibility to report and be properly reimbursed for these services.**

Interprofessional Telephone/ Internet/Electronic Health Record Consultations

99446
Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician or other qualified health care professional, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 5-10 minutes of medical consultative discussion and review.

99447
11-20 minutes of medical consultative discussion and review

99448
21-30 minutes of medical consultative discussion and review

99449
31 minutes or more of medical consultative discussion and review

99451
Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician or other qualified health care professional, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time.

Interprofessional Telephone/Internet/Electronic Health Record Consultation Services are Efficient, Economical, and Effective

Efficient Care

Psychologists can now provide non-face-to-face consultation services to physicians and other qualified healthcare professionals where they are consulting about a patient without the patient present. These services can include consultation with physicians such as primary care providers or physician specialists (e.g., oncologists, nephrologists). Consultation can also be provided to other mental health professionals (e.g., community therapists). Consultative services with a psychologist facilitate timely specialty mental and behavioral advice for patients and providers without the need for a face-to-face visit. Changes in reimbursement for consultation are necessary to further the goal of leveraging psychologists' expertise to increase access to care. This efficiency results in improving access to care in a timely manner.

Economical Care

Interprofessional Telephone/Internet/Electronic Health Record Consultation Services can facilitate greater collaboration between clinicians. Having access to psychologists through non-face-to-face consultations improves access to mental and behavioral specialty care and expands the capacity to treat behavioral health concerns. Consultations can reduce referrals to specialty services and reduce unnecessary face-to-face visits. This has a significant impact on patients and the healthcare system. Benefits may include reducing waiting times for patients who need face-to-face specialized care and cost savings as an alternative model for providing specialized health care services. **This model of care can result in cost savings.**

Importantly, President Biden announced that as a part of his mental health strategy the FY23 budget will double funding for primary and behavioral health integration programs. Specifically, the funding is to support the delivery of whole-person care through behavioral health integration, authorizing Medicaid coverage and reimbursement of interprofessional consultations so that primary care providers can consult with a specialist and provide needed care for patients (White House Brief, HHS Roadmap BHI Brief).

Effective Care

Interprofessional consultation enables a level of coordinated, collaborative integrated care and is a useful and valued tool to assist in addressing the significant treatment gap for mental and behavioral health. Non-face-to-face consultations can improve access to specialty care, shorten wait times, and reduce specialty outpatient visits. It is a way to get rapid access to specialty psychology expertise that benefits both the patient and the provider. **This is an effective model of care.**

Examples of Effective Care:

Integrated behavioral health settings
In integrated primary care settings, psychologists are working closely with physicians to make it easier for patients to access mental and behavioral health services and contribute to improvements in health outcomes. The psychologist operates in a consultative role within a primary care treatment team and the psychologist will provide consultation to the primary care provider on treatment recommendations and intervention strategies.

Pediatric Mental Health Care Access programs
The Pediatric Mental Health Care Access program (through HRSA) gives grants to states to support multidisciplinary teams of mental health providers who provide consultation services to pediatric primary care providers. The services offered include phone consultations, training, technical assistance, and care coordination.

There are Pediatric Mental Health Care Access grantees in 23 states plus the District of Columbia, with several more states in development. In Mississippi, for example, the program—known as Child Access to Mental Health and Psychiatry, or CHAMP—offers same-day phone consultations to the state's pediatric primary care providers. Since receiving the HRSA grant in 2018, the program has registered a quarter of the state's pediatric primary care providers in its database of participating providers.

Consulting with other mental health professionals
Psychologists provide consultation to other mental health professionals. For example, psychologists in the Indiana Behavioral Health Access Program for Youth (Be Happy) provide telephone consultation to therapists in the community, whether in private practice, a community mental health center, or an integrated care setting. Psychologists provide consultation when the patient may be more complicated than expected, on treatment planning/recommendations, or planning on how to implement a particular kind of intervention a patient might need.