INFORMED

FLASH: eviCore Provider Portal Update

February 25, 2021

eviCore has introduced a new internet landing page. The new page gives providers an at-a-glance view of all their requested cases through a unified worklist, making information more readily available.

With this new worklist, providers can:

- Check authorization details and status.
- Easily identify cases where more clinical is needed.
- Conveniently upload and view clinical information and letters.
- Quickly access request details on the portal in which the case was submitted.
- Automatically be directed to the appropriate portal to start a new request.

You no longer need to search using the individual case number to check a status or add clinical information. This new eviCore page allows you to see all requests and pending items that might need additional attention.

If you have questions, contact your provider relations specialist

CORRECTION: Psychotherapy Codes and When to Bill Them

There was an error in the February Informed newsletter regarding Psychotherapy codes and when to bill them. Please see below for revised coding guidance. If you have questions, please contact your provider relations specialist.

Per AMA CPT Professional 2021- Psychotherapy is a variety of treatment techniques in which a physician or other qualified health care provider helps a patient with a mental illness or behavioral disturbance identify and alleviate any emotional disruptions, maladaptive behavioral patterns and contributing/exacerbating factors. This treatment also involves encouraging personality growth and development through coping techniques and problem-solving skills.

90832

- Report 90832 for 30 minutes of face-to-face time spent with the patient without an additional evaluation and management (E/M) service.

90833 (corrected)

- Report 90833 if a separate E/M service is performed during the same encounter as the 30 minutes of psychotherapy. (List separately in addition to the code for primary procedure.)
- Code first (99202-99255 [99224, 99225, 99226], 99304-99337, 99341-99350).

90834

- Report 90834 for 45 minutes of face-to-face time spent with the patient without an additional E/M service.

90836 (corrected)

- Report 90836 if a separate E/M service is performed during the same encounter as the 45 minutes of psychotherapy. (List seperately in addition to the code for primary procedure.)
- Code first (99202-99255 [99224, 99225, 99226], 99304-99337, 99341-99350).

90837

- Report 90837 for 60 minutes of face-to-face time spent with the patient without an additional E/M service.
- Code also prolonged service for psychotherapy performed without E/M service face-to-face with patient lasting 90 minutes or longer (99354-99357).

90838 (corrected)

- Report 90838 if a separate E/M service is performed during the same encounter as the 60 minutes of psychotherapy. (List separately in addition to the code for primary procedure.)
- Code first (99202-99255 [99224, 99225, 99226], 99304-99337, 99341-99350).

Include Modifier 95 - indicating that the service rendered was actually performed via telehealth.

All codes include:

- Face-to-face time with patient (family, other informers may also be present).
- Pharmacologic management in time allocated to psychotherapy service codes.
- Psychotherapy only (90832, 90834, 90837).
- Psychotherapy with separately identifiable medical E/M services includes add-on codes (90833, 90836, 90838).
- Service times no less than 16 minutes.
- Services provided in all settings.
- Therapeutic communication to:
  - Ameliorate patient's mental and behavioral symptoms.
  - Modify behavior.

- Support and encourage personality growth and development.
  - o Treatment for:
    - Behavior disturbances.
    - Mental illness.

Psychotherapy Time Example per AAPC

90832 Psychotherapy, 30 minutes with patient
90834 Psychotherapy, 45 minutes with patient
For example:
Actual psychotherapy time with the patient is 37 minutes.
The appropriate code to bill is 90832.

Why?
- Even though only 16 minutes is needed to report 90832 (past the midpoint of zero and 30 minutes), you cannot use 23 minutes as the midpoint between zero and 45 minutes.
- CPT has instructions on sequential times. Per CPT instructions, when codes are ranked in sequential typical times, and the actual time is between two typical times, use the code with the typical time closest to the actual time.

How should you calculate?
- 90832: 30 minutes
  Actual Time: 37 minutes
  Difference: 7 minutes
  90834: 45 minutes
  Actual Time: 37 minutes
  Difference: 8 minutes

Sources Cited:

Take Time to Understand Time-based Codes
Palmeter
https://www.aapc.com/blog/38424-take-time-to-understand-time-based-codes/

CPT 2021 American Medical Association 2020