*Optum, Public Sector San Diego, Medi-Cal CPT Codes and Rates- LMFT/LCSW/LPCC - Effective Date 07/01/2020

This Fee Schedule supersedes the previous version dated 07/01/2019

New Modifiers: Codes approved to be rendered via Telehealth (GT) or Telephone (SC) are identified below with the modifiers; if the modifier is not included in the CPT Code Column it is not approved for this modality. Please Note the Place of Service (POS) for the Telehealth (GT) modifier is 02

SC = Services Rendered Via Telephone

GT = Services Rendered Via Telehealth

CPT Code	Service Description	Expanded Description	Minutes	Child Rates:	Adult Rates:
90791 (SC, GT)	Diagnostic Evaluation	Diagnostic evaluation is an integrated biopsychosocial assessment, including history, mental status, and recommendations. The evaluation may include communication with family or other sources.	50		
90832 (SC, GT)	Outpatient Psychotherapy with patient	Psychotherapy is the treatment of a mental illness and behavioral disturbances, in which the provider through definitive therapeutic communication attempts to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.	30		
90834 (SC, GT)	Outpatient Psychotherapy with patient	Psychotherapy is the treatment of a mental illness and behavioral disturbances, in which the provider through definitive therapeutic communication attempts to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.	45		
90846 (SC, GT)	Family Therapy without patient	Family psychotherapy without the patient present	50		
90847 (SC, GT)	Family Therapy (conjoint psychotherapy) with patient	Family psychotherapy (conjoint psychotherapy with patient present)	50		
90853	Group Psychotherapy	Group psychotherapy with a maximum of 8 patients (other than a multiple-family group) – rate is per patient	60		
99341	Home Visit/New Patient – Low Severity	Home visit for the evaluation and management of a new patient, which requires these three (3) components: A problem focused history; A problem focused exam; and Straightforward medical decision making.	20		
99343	Home Visit/New Patient - Moderate to High Severity	Home visit for the evaluation and management of a new patient, which requires these three (3) components: A detailed problem focused history; A detailed problem focused examination, and Medical decision making of "moderate" complexity.	45		
99366 (SC, GT)	(Includes CFT Meetings for CWS	Medical team conference in which a provider (non-physician) spends 30 minutes or more face-to-face with the client and/or family. This includes Child, Family and Interdisciplinary Team (CFT) meeting of health care professionals with CWS client and/or family. (1 unit = 30 minutes)	30		

Note: Providers are responsible for knowing the full description of the CPT code being billed and should review the current AMA American Medical Association CPT codebook for rules and guidelines.

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^{*} Previously known as United Behavioral Health (UBH) for purposes of this fee schedule

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CPT Code	Service Description	Expanded Description	Minutes	Child Rates:	Adult Rates:
99368 (SC, GT)	Medical Team Conference (Without Face to Face)/Case Management	Medical team conference in which a provider (non-physician) spends 30 minutes or more not face-to-face with the client and/or family. This includes case management services are activities provided to help patients access medical, educational, social, prevocational, and rehabilitative or other needed community services.			

ľ	*Modifiers Below are Required to Ensure Accurate Claims Payments for Services Rendered by Telephone or Telehealth				
	(New Modifiers are Bolded)				
I	SC = Telephone GT = Telehealth				

Note: Providers are responsible for knowing the full description of the CPT code being billed and should review the current AMA American Medical Association CPT codebook for rules and guidelines.

Billing Code – not CPT	Service Description	Expanded Description (News Codes are "Bolded")	Flat Rate
CANS01	CANS Training & Certification	Child Adolescent Needs & Strength Assessment Training and Certification; includes completion of RIHS training and successful certification (1x only/1 unit) – <i>This code is effective 04/01/2019</i>	
CANS02	CANS Report	Submission of an appropriate CANS Report (1 each/1 unit)	
CANS03	CANS Recertification	Annual Recertification for Child Adolescent Needs & Strength Assessment (1 annually/1 unit)	

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