



PROVIDER ALERT



Alert #10 8-18-2009 (REVISED) ALDA, HCAL, HCBK, HCCH, HCCMP, HCNC, HCNE, HCYAB

Appropriate Use of Diagnosis Code 799.9

This notice serves to remind providers that diagnosis code 799.9 is not an appropriate or acceptable diagnosis code unless the diagnosis code is billed with an acceptable procedure code. The acceptable procedure codes are listed below.

All providers must ensure claims submitted to Community Care Behavioral Health electronically, pre-log or paper, are populated with both acceptable diagnosis and procedure codes. In any instance a claim is billed with diagnosis code 799.9 and the procedure code populated on the claim is not a procedure code referenced below, the claim system is currently configured to deny the claim or claims.

Procedure Codes which are Billable with Diagnosis Code 799.9:

<u>Service Description</u>	<u>Code:</u>
Psychiatric Examination & Evaluation of a Patient, By MD in facility	90801 SE
Psychiatric Examination & Evaluation of Patient, By MD in a facility	90801 HF
Psychiatric Examination & Evaluation of a Patient, By MD in facility	90801 HE
First Appointment by clinician other than a MD. Overall clinical evaluation with no MD involvement on that day	90801 HP
Psychiatric Evaluation	90801 U1
Telephone Crisis	H0030
Mobile Crisis, Team Deployed	H2011 ET
Mobile Crisis, Individual Delivered	H2011 HE
Medical Mobile Crisis, Team Delivered	H2011 HK
Mobile Crisis, Team Delivered	H2011 HT
Walk-in Crisis	H2011
D&A Level of Care Assessment	H0001

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