

# HCPCS Level II Definitions and Guidelines

One of the keys to gaining accurate reimbursement lies in understanding the multiple coding systems that are used to identify services. To be well versed in reimbursement practices, coders should be familiar with the ICD-9-CM, CPT, and HCPCS Level II coding systems. The last of these, the HCPCS Level II system, is increasingly important to reimbursement, as it has been extended to a wider array of medical services.

HCPCS Level II codes commonly are referred to as national codes or by the acronym HCPCS, which stands for the Healthcare Common Procedure Coding System (pronounced "hik-piks"). When using HCPCS Level II codes, keep the following in mind:

- CMS does not use consistent terminology for unlisted services or procedures. The code descriptions may include any one of the following terms: unlisted, not otherwise classified (NOC), unspecified, unclassified, other, and miscellaneous.
- When billing for specific supplies and materials, avoid CPT code 99070 (general supplies) and be as specific as possible unless the local carrier or payer directs otherwise.
- Coding and billing should be based on the service and supplies provided. Documentation should describe the patient's problems and the service provided to enable the payer to determine reasonableness and necessity of care.
- Refer to Medicare coverage reference to determine whether the care provided is a covered service.
- When both a CPT and HCPCS Level II code share nearly identical narratives, apply the CPT code. If the narratives are not identical, select the code with the narrative that better describes the service. Generally, the HCPCS Level II code is more specific and takes precedence over the CPT code.

## Symbols

Symbols used in the HCPCS Level II system may be presented in various ways, depending on the vendor. In this publication, the pattern established by the AMA in the CPT code books is followed. For example, bullets and triangles signify new and revised codes, respectively.

When a code is new to the HCPCS Level II system, a bullet (●) appears to the left of the code. This symbol is consistent with the CPT system's symbol for new codes. The bullet represents a code never before seen in the HCPCS coding system.

A triangle (▲) is used (as in the CPT system) to indicate that a change in the narrative of a code has been made from the previous year's edition. The change made may be slight or significant, but it usually changes the application of the code.

## Modifiers

A system of two-digit modifiers has been developed to allow the provider to indicate that the service or procedure has been altered by certain circumstances. Fee schedules have been developed based on these modifiers. Some third-party payers, such as Medicare,

require mental health professionals to use modifiers in some circumstances, such as to indicate the provider type rendering the service. Communication with the payer group ensures accurate coding.

Addition of the modifier does not alter the basic description for the service; it merely qualifies the circumstances under which the service was provided. Circumstances that modify a service include the following:

- Procedures that have both a technical and professional component were performed.
- More than one individual or setting was involved in the service.
- Only part of a service was performed.
- The service was delivered to more than one patient.

The following list of HCPCS modifiers is used most often by mental health professionals:

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| AH | Clinical psychologist                                                                                                                                              |
| AJ | Clinical social worker                                                                                                                                             |
| AQ | Physician providing a service in an unlisted health professional shortage area (HPSA)                                                                              |
| AR | Physician provider services in a physician scarcity area                                                                                                           |
| CC | Procedure code change (use CC when the procedure code submitted was changed either for administrative reasons or because an incorrect code was filed)              |
| GA | Waiver of liability statement issued as required by payer policy, individual case                                                                                  |
| GR | This service was performed in whole or in part by a resident in a department of Veterans Affairs medical center or clinic, supervised in accordance with VA policy |
| GU | Waiver of liability statement issued as required by payer policy, routine notice                                                                                   |
| GX | Notice of liability issued, voluntary under payer policy                                                                                                           |
| GY | Item or service statutorily excluded, does not meet the definition of any Medicare benefit or for non-Medicare insurers, is not a contract benefit                 |
| GZ | Item or service expected to be denied as not reasonable and necessary                                                                                              |
| H9 | Court-ordered                                                                                                                                                      |
| HA | Child/adolescent program                                                                                                                                           |
| HB | Adult program, nongeriatric                                                                                                                                        |
| HC | Adult program, geriatric                                                                                                                                           |
| HE | Mental health program                                                                                                                                              |
| HF | Substance abuse program                                                                                                                                            |
| HG | Opioid addiction treatment program                                                                                                                                 |

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|----|------------------------------------------------------------------------------------|
| HI | Integrated mental health and mental retardation/developmental disabilities program |
| HK | Specialized mental health programs for high risk populations                       |
| HR | Family/couple with client present                                                  |
| HS | Family/couple without client present                                               |
| TJ | Program group, child and/or adolescent                                             |
| TS | Follow-up service                                                                  |
| TT | Individualized service provided to more than one patient in same setting           |

### HCPCS Level II Codes

The following is a list of HCPCS Level II codes used to indicate services commonly provided by mental health professionals.

|       |                                                                                                                                                                                                     |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| G0175 | Scheduled interdisciplinary team conference (minimum of 3 exclusive of patient care nursing staff) with patient present                                                                             |
| G0176 | Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more) |
| G0177 | Training and education services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)                                                    |
| H0001 | Alcohol and/or drug assessment                                                                                                                                                                      |
| H0002 | Behavioral health screening to determine eligibility for admission to treatment program                                                                                                             |
| H0003 | Alcohol and/or drug screening; laboratory analysis of specimens for presence of alcohol and/or drugs                                                                                                |
| H0004 | Behavioral health counseling and therapy, per 15 minutes                                                                                                                                            |
| H0005 | Alcohol and/or drug services; group counseling by a clinician                                                                                                                                       |
| H0006 | Alcohol and/or drug services; case management                                                                                                                                                       |
| H0007 | Alcohol and/or drug services; crisis intervention (outpatient)                                                                                                                                      |
| H0008 | Alcohol and/or drug services; sub-acute detoxification (hospital inpatient)                                                                                                                         |
| H0009 | Alcohol and/or drug services; acute detoxification (hospital inpatient)                                                                                                                             |
| H0010 | Alcohol and/or drug services; subacute detoxification (residential addiction program inpatient)                                                                                                     |
| H0011 | Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)                                                                                                        |
| H0012 | Alcohol and/or drug services; subacute detoxification (residential addiction program outpatient)                                                                                                    |
| H0013 | Alcohol and/or drug services; acute detoxification (residential addiction program outpatient)                                                                                                       |

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| H0014 | Alcohol and/or drug services; ambulatory detoxification                                                                                                                                                                                                                         |
| H0015 | Alcohol and/or drug services; intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan), including assessment, counseling; crisis intervention, and activity therapies or education |
| H0016 | Alcohol and/or drug services; medical/somatic (medical intervention in ambulatory setting)                                                                                                                                                                                      |
| H0017 | Behavioral health; residential (hospital residential treatment program), without room and board, per diem                                                                                                                                                                       |
| H0018 | Behavioral health; short-term residential (nonhospital residential treatment program), without room and board, per diem                                                                                                                                                         |
| H0019 | Behavioral health; long-term residential (non-medical, nonacute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem                                                                                          |
| H0020 | Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)                                                                                                                                                             |
| H0021 | Alcohol and/or drug training service (for staff and personnel not employed by providers)                                                                                                                                                                                        |
| H0022 | Alcohol and/or drug intervention service (planned facilitation)                                                                                                                                                                                                                 |
| H0023 | Behavioral health outreach service (planned approach to reach a targeted population)                                                                                                                                                                                            |
| H0024 | Behavioral health prevention information dissemination service (one-way direct or nondirect contact with service audiences to affect knowledge and attitude)                                                                                                                    |
| H0025 | Behavioral health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior)                                                                                                                                      |
| H0026 | Alcohol and/or drug prevention process service, community-based (delivery of services to develop skills of impactors)                                                                                                                                                           |
| H0027 | Alcohol and/or drug prevention environmental service (broad range of external activities geared toward modifying systems in order to mainstream prevention through policy and law)                                                                                              |
| H0028 | Alcohol and/or drug prevention problem identification and referral service (e.g., student assistance and employee assistance programs), does not include assessment                                                                                                             |
| H0029 | Alcohol and/or drug prevention alternatives service (services for populations that exclude alcohol and other drug use e.g. alcohol free social events)                                                                                                                          |
| H0030 | Behavioral health hotline service                                                                                                                                                                                                                                               |
| H0031 | Mental health assessment, by nonphysician                                                                                                                                                                                                                                       |
| H0032 | Mental health service plan development by nonphysician                                                                                                                                                                                                                          |

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| H0033 | Oral medication administration, direct observation                                          | H2020 | Therapeutic behavioral services, per diem                                                                                                                                                                          |
| H0034 | Medication training and support, per 15 minutes                                             | H2021 | Community-based wrap-around services, per 15 minutes                                                                                                                                                               |
| H0035 | Mental health partial hospitalization, treatment, less than 24 hours                        | H2022 | Community-based wrap-around services, per diem                                                                                                                                                                     |
| H0036 | Community psychiatric supportive treatment, face-to-face, per 15 minutes                    | H2023 | Supported employment, per 15 minutes                                                                                                                                                                               |
| H0037 | Community psychiatric supportive treatment program, per diem                                | H2024 | Supported employment, per diem                                                                                                                                                                                     |
| H0038 | Self-help/peer services, per 15 minutes                                                     | H2025 | Ongoing support to maintain employment, per 15 minutes                                                                                                                                                             |
| H0039 | Assertive community treatment, face-to-face, per 15 minutes                                 | H2026 | Ongoing support to maintain employment, per diem                                                                                                                                                                   |
| H0040 | Assertive community treatment program, per diem                                             | H2027 | Psychoeducational service, per 15 minutes                                                                                                                                                                          |
| H0041 | Foster care, child, nontherapeutic, per diem                                                | H2028 | Sexual offender treatment service, per 15 minutes                                                                                                                                                                  |
| H0042 | Foster care, child, nontherapeutic, per month                                               | H2029 | Sexual offender treatment service, per diem                                                                                                                                                                        |
| H0043 | Supported housing, per diem                                                                 | H2030 | Mental health clubhouse services, per 15 minutes                                                                                                                                                                   |
| H0044 | Supported housing, per month                                                                | H2031 | Mental health clubhouse services, per diem                                                                                                                                                                         |
| H0045 | Respite care services, not in the home, per diem                                            | H2032 | Activity therapy, per 15 minutes                                                                                                                                                                                   |
| H0046 | Mental health services, not otherwise specified                                             | H2033 | Multisystemic therapy for juveniles, per 15 minutes                                                                                                                                                                |
| H0047 | Alcohol and/or other drug abuse services, not otherwise specified                           | H2034 | Alcohol and/or drug abuse halfway house services, per diem                                                                                                                                                         |
| H0048 | Alcohol and/or other drug testing: collection and handling only, specimens other than blood | H2035 | Alcohol and/or other drug treatment program, per hour                                                                                                                                                              |
| H0049 | Alcohol and/or drug screening                                                               | H2036 | Alcohol and/or other drug treatment program, per diem                                                                                                                                                              |
| H0050 | Alcohol and/or drug services, brief intervention, per 15 minutes                            | H2037 | Developmental delay prevention activities, dependent child of client, per 15 minutes                                                                                                                               |
| H1010 | Nonmedical family planning education, per session                                           | M0064 | Brief office visit for the sole purpose of monitoring or changing of drug prescriptions used in the treatment of mental psychoneurotic and personality disorders                                                   |
| H1011 | Family assessment by licensed behavioral health professional for state defined purposes     | S0220 | Medical conference by a physician with interdisciplinary team of health professionals representative of community agencies to coordinate activities of patient care (patient is present); approximately 30 minutes |
| H2000 | Comprehensive multidisciplinary evaluation                                                  | S0221 | Medical conference by a physician with interdisciplinary team of health professionals representative of community agencies to coordinate activities of patient care (patient is present); approximately 60 minutes |
| H2001 | Rehabilitation program, per 1/2 day                                                         | S9075 | Smoking cessation treatment                                                                                                                                                                                        |
| H2010 | Comprehensive medication services, per 15 minutes                                           | S9453 | Smoking cessation classes, nonphysician provider, per session                                                                                                                                                      |
| H2011 | Crisis intervention service, per 15 minutes                                                 | S9454 | Stress management classes, nonphysician provider, per session                                                                                                                                                      |
| H2012 | Behavioral health day treatment, per hour                                                   |       |                                                                                                                                                                                                                    |
| H2013 | Psychiatric health facility service, per diem                                               |       |                                                                                                                                                                                                                    |
| H2014 | Skills training and development, per 15 minutes                                             |       |                                                                                                                                                                                                                    |
| H2015 | Comprehensive community support services, per 15 minutes                                    |       |                                                                                                                                                                                                                    |
| H2016 | Comprehensive community support services, per diem                                          |       |                                                                                                                                                                                                                    |
| H2017 | Psychosocial rehabilitation services, per 15 minutes                                        |       |                                                                                                                                                                                                                    |
| H2018 | Psychosocial rehabilitation services, per diem                                              |       |                                                                                                                                                                                                                    |
| H2019 | Therapeutic behavioral services, per 15 minutes                                             |       |                                                                                                                                                                                                                    |