Guidelines for the Use of CPT Codes

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rganizations and the Health Care Financing Administration. hese codes should be obtained from insurance carriers, health maintenance The following set of guidelines is intended as a template for the application of the 998 CPT codes. These are suggestions; additional information regarding the use of

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If diagnosis is neurological, then use 96115 If diagnosis is psychiatric, then use 90801

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If diagnosis is neurological, then use 96117 If diagnosis is developmental, then use 96111 If diagnosis is psychiatric, then use 96100

Diagnoses

If problem is neurological, then use ICD system If problem is psychiatric, then use DSM system

Diagnoses and Procedures Codes

neuropsychological CPT) Match diagnoses with procedure codes (neurological ICD diagnosis with

Time

Round up or down as applicable increments (as specified) For all therapeutic or rehabilitation codes, use either quarterly or half-hour For all interviewing and testing codes, use hourly increments

during, and post-clinical service activities. Clinical service time is defined as time involved in the following: pre-,

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neuropsychological services. Hence, it is recommended that non-psychiatric (e.g., neuropsychological procedure codes. neurological) diagnostic codes be used in conjunction with the new diagnostic codes reflects continued to use the Diagnostic and Statistical Manual (DSM) system to code diagnoses. This combination of non-psychiatric procedural codes and psychiatric system, outside of the psychiatry codes. However, many neuropsychologists have because the new neuropsychology codes are located in a new section of the CPT for more accurate billing of neuropsychological services. This has occurred, in part, The development of new Current Procedural Terminology (CPT) codes has allowed an inconsistency when describing professional

categorically (with the assistance of Leslie Rosenstein, Ph.D.; Scott & White commonly used neurological and related diagnostic codes. These codes have been Memorial Hospital, Temple, Texas) the Academy. Further, these diagnostic codes are presented both alphabetically and used during the last year in our clinical practice with input from several members of We have reviewed the International Classification of Diseases (9th revision) for

in terms of codes and categories. Please address your suggestions to: preliminary and we look forward to input from colleagues for eventual revision both However, the publication of this list does not imply their endorsement. This list is developers and publishers of the International Classification of Diseases system. These codes are being reprinted with permission of the World Health Organization,

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