

***Procedure Codes Included in the FAIR Health NPIC®  
(National Private Insurance Claims) Dataset***  
*produced for the Maternal Mental Health State Report Cards*

Measures #12, #13, #17, and #18 of the **Maternal Mental Health State Report Cards** use a FAIR Health NPIC® (National Private Insurance Claims) dataset produced for The Policy Center for Maternal Mental Health. FAIR Health has the largest repository of private insurer claims in the United States.

***2023 Report Cards***

In the **2023 report cards**, the FAIR Health NPIC® dataset included claims submitted in 2021 to private insurers for services provided to pregnant and postpartum persons. **The procedure codes included for the 2023 report cards can be found below.**

***2024 Report Cards***

In the **2024 report cards**, the dataset included claims submitted in 2022 to private insurers for services provided to pregnant and postpartum persons. **Three additional codes were added in 2024, noted here and below:**

- 99484 Care management for behavioral health conditions, 20 minutes or more of clinical staff time
- 99490 Chronic care management, 20 minutes or more of clinical staff time
- 99439 Chronic care management of two or more conditions, additional 20 minutes

## Procedure Codes Included in Measure #12 and #13

### Mental Health Assessment Codes

Procedure Code	Description
96127	Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument
96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes
96137	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
96138	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
96139	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
96146	Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only
96150	Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment
96151	Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; re-assessment
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)
96160	Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument
96161	Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument
1220F	Patient screened for depression (SUD)
2014F	Mental status assessed (CAP) (EM)
3351F	Negative screen for depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)
3352F	No significant depressive symptoms as categorized by using a standardized depression assessment tool (MDD)
3353F	Mild to moderate depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)
3354F	Clinically significant depressive symptoms as categorized by using a standardized depression screening/assessment tool (MDD)
3700F	Psychiatric disorders/disturbances assessed
3725F	Screening for depression performed (DEM)
G0444	Annual depression screening, 15 minutes
G2121	Depression, anxiety, apathy, and psychosis assessed
G8431	Screening for depression is documented as being positive and a follow-up plan is documented
G8510	Screening for depression is documented as negative, a follow-up plan is not required
G8511	Screening for depression documented as positive, follow-up plan not documented, reason not given
H0002	Behavioral health screening to determine eligibility for admission to treatment program
H0031	Mental health assessment, by non-physician
S3005	Performance measurement, evaluation of patient self assessment, depression
96127	Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument

## Procedure Codes Included in Measure #17 and #18

The following procedure codes were new in the 2024 report cards:

- 99484 Initial assessment or follow-up monitoring, of at least 20 minutes, including use of validated rating scale(s)
- 99490 Chronic care management (20 mins)
- 99439 Chronic care management (40 mins)

### Mental Health Service Codes

Procedure Code	Type of Code	Description
4060F	Psychotherapy	Psychotherapy services provided
4065F	Psychotherapy	Antipsychotic pharmacotherapy prescribed
4306F	Psychotherapy	Patient counseled regarding psychosocial and pharmacologic treatment options for opioid addiction
4320F	Psychotherapy	Patient counseled regarding psychosocial and pharmacologic treatment options for alcohol dependence
90785	Psychotherapy	Psychiatric services complicated by communication factor
90791	Psychotherapy	Psychiatric diagnostic evaluation
90792	Psychotherapy	Psychiatric diagnostic evaluation with medical services
90832	Psychotherapy	Psychotherapy, 30 minutes
90833	Psychotherapy	Psychotherapy with evaluation and management visit, 30 minutes
90834	Psychotherapy	Psychotherapy, 45 minutes
90836	Psychotherapy	Psychotherapy with evaluation and management visit, 45 minutes
90837	Psychotherapy	Psychotherapy, 1 hour
90838	Psychotherapy	Psychotherapy with evaluation and management visit, 1 hour
90839	Psychotherapy	Psychotherapy for crisis, first hour
90840	Psychotherapy	Psychotherapy for crisis, each additional 30 minutes
90845	Psychotherapy	Psychoanalysis
90846	Psychotherapy	Family psychotherapy without patient, 50 minutes
90847	Psychotherapy	Family psychotherapy with patient, 50 minutes
90849	Psychotherapy	Multiple-family group psychotherapy
90853	Psychotherapy	Group psychotherapy
90863	Psychotherapy	Management of prescriptions and review of medication
90875	Psychotherapy	Psychophysiological therapy incorporating biofeedback training with psychotherapy, 30 minutes
90876	Psychotherapy	Psychophysiological therapy incorporating biofeedback training with psychotherapy, 45 minutes
90887	Psychotherapy	Explanation of psychiatric, medical examinations, procedures, and data to responsible person
96130	Psychotherapy	Evaluation of psychological test, first hour
96131	Psychotherapy	Evaluation of psychological test, each additional hour
96132	Psychotherapy	Evaluation of neuropsychological test, first hour
96133	Psychotherapy	Evaluation of neuropsychological test, each additional hour
99439	Psychotherapy	Chronic care management services for two or more chronic conditions, additional 20 minutes of clinical staff time directed by health care professional, per calendar month
99484	Psychotherapy	Care management services for behavioral health conditions, 20 minutes or more clinical staff time directed by health care professional
99490	Psychotherapy	Chronic care management services, first 20 minutes of clinical staff time directed by health care professional, per calendar month
99492	Psychotherapy	Initial psychiatric collaborative care management, first calendar month, first 70 minutes
99493	Psychotherapy	Follow-up psychiatric collaborative care management, subsequent calendar month, first 60 minutes
99494	Psychotherapy	Psychiatric collaborative care management per calendar month, each additional 30 minutes
G0410	Psychotherapy	Group psychotherapy, partial hospitalization setting, 45+ minutes
G0411	Psychotherapy	Interactive group psychotherapy, partial hospitalization setting, 45+ minutes
G2214	Psychotherapy	Psychiatric collaborative care management, first 30 minutes in a month of behavioral health care manager activities
H2013	Psychotherapy	Psychiatric health facility service, per diem
H2027	Psychotherapy	Psychoeducational service, per 15 minutes
S9480	Psychotherapy	Intensive outpatient psychiatric services, each day

HCPCS	Description
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
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; sub-acute detoxification (residential addiction program inpatient)
H0011	Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)
H0012	Alcohol and/or drug services; sub-acute detoxification (residential addiction program outpatient)
H0013	Alcohol and/or drug services; acute detoxification (residential addiction program outpatient)
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 (non-hospital residential treatment program), without room and board, per diem
H0019	Behavioral health; long-term residential (non-medical, non-acute 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)
H0033	Oral medication administration, direct observation
H0035	Mental health partial hospitalization, treatment, less than 24 hours
H0045	Respite care services, not in the home, per diem
H0048	Alcohol and/or other drug testing: collection and handling only, specimens other than blood
H0049	Alcohol and/or drug screening
H0050	Alcohol and/or drug services, brief intervention, per 15 minutes
H2001	Rehabilitation program, per 1/2 day
H2010	Comprehensive medication services, per 15 minutes
H2012	Behavioral health day treatment, per hour
H2013	Psychiatric health facility service, per diem
H2017	Psychosocial rehabilitation services, per 15 minutes
H2018	Psychosocial rehabilitation services, per diem
H2019	Therapeutic behavioral services, per 15 minutes
H2020	Therapeutic behavioral services, per diem
H2027	Psychoeducational service, per 15 minutes
H2028	Sexual offender treatment service, per 15 minutes
H2029	Sexual offender treatment service, per diem
H2032	Activity therapy, per 15 minutes
H2033	Multisystemic therapy for juveniles, per 15 minutes
H2035	Alcohol and/or other drug treatment program, per hour
H2036	Alcohol and/or other drug treatment program, per diem
H2037	Developmental delay prevention activities, dependent child of client, per 15 minutes



**Procedure Codes Included in Measure #17 and #18** (Note: These codes were only included when paired with a mental health diagnosis.)

**Evaluation and Management Procedures**

Procedure Code	Type of Code	Description
G2251	Evaluation and Management	Virtual check-in by non-physician, 5-10 minutes of clinical discussion
G2252	Evaluation and Management	Virtual check-in by physician or qualified health professional, 11-20 minutes of clinical discussion
G0071	Evaluation and Management	Non-face to-face communication services between patient and rural health clinic, 5 minutes or more
99201	Evaluation and Management	New patient office or other outpatient visit, 10-14 minutes
99202	Evaluation and Management	New patient office or other outpatient visit, 15-29 minutes
99203	Evaluation and Management	New patient office or other outpatient visit, 30-44 minutes
99204	Evaluation and Management	New patient office or other outpatient visit, 45-59 minutes
99205	Evaluation and Management	New patient office or other outpatient visit, 60-74 minutes
99211	Evaluation and Management	Office or other outpatient visit for the evaluation and management of established patient that may not require presence of healthcare professional
99212	Evaluation and Management	Established patient office or other outpatient visit, 10-19 minutes
99213	Evaluation and Management	Established patient office or other outpatient visit, 20-29 minutes
99214	Evaluation and Management	Established patient office or other outpatient visit, 30-39 minutes
99215	Evaluation and Management	Established patient office or other outpatient visit, 40-54 minutes
99241	Evaluation and Management	Office consultation, typically 15 minutes
99242	Evaluation and Management	Office consultation, typically 30 minutes
99243	Evaluation and Management	Office consultation, typically 40 minutes
99244	Evaluation and Management	Office consultation, typically 1 hour
99245	Evaluation and Management	Office consultation, typically 80 minutes
99341	Evaluation and Management	New patient home visit, typically 20 minutes
99342	Evaluation and Management	New patient home visit, typically 30 minutes
99343	Evaluation and Management	New patient home visit, typically 45 minutes
99344	Evaluation and Management	New patient home visit, typically 1 hour
99345	Evaluation and Management	New patient home visit, typically 75 minutes
99347	Evaluation and Management	Established patient home visit, typically 15 minutes
99348	Evaluation and Management	Established patient home visit, typically 25 minutes
99349	Evaluation and Management	Established patient home visit, typically 40 minutes
99350	Evaluation and Management	Established patient home visit, typically 1 hour
99354	Evaluation and Management	Extended office or other outpatient service, first hour
99355	Evaluation and Management	Extended office or other outpatient service, each additional 30 minutes
99382	Evaluation and Management	Initial new patient preventive medicine evaluation (1-4 years)
99383	Evaluation and Management	Initial new patient preventive medicine evaluation (5-11 years)
99384	Evaluation and Management	Initial new patient preventive medicine evaluation (12-17 years)
99385	Evaluation and Management	Initial new patient preventive medicine evaluation (18-39 years)
99387	Evaluation and Management	Initial new patient preventive medicine evaluation (65 years or older)
99391	Evaluation and Management	Established patient periodic preventive medicine examination (younger than 1 year)
99392	Evaluation and Management	Established patient periodic preventive medicine examination (1-4 years)
99393	Evaluation and Management	Established patient periodic preventive medicine examination (5-11 years)
99394	Evaluation and Management	Established patient periodic preventive medicine examination (12-17 years)
99395	Evaluation and Management	Established patient periodic preventive medicine examination (18-39 years)
99396	Evaluation and Management	Established patient periodic preventive medicine examination (40-64 years)
99397	Evaluation and Management	Established patient periodic preventive medicine examination (65 year old or older)
99401	Evaluation and Management	Preventive medicine counseling, typically 15 minutes
99402	Evaluation and Management	Preventive medicine counseling, typically 30 minutes
99403	Evaluation and Management	Preventive medicine counseling, typically 45 minutes
99404	Evaluation and Management	Preventive medicine counseling, typically 1 hour
99406	Evaluation and Management	Smoking and tobacco use intensive counseling, 4-10 minutes
99407	Evaluation and Management	Smoking and tobacco use intensive counseling, more than 10 minutes
99411	Evaluation and Management	Group preventive medicine counseling, typically 30 minutes
99412	Evaluation and Management	Group preventive medicine counseling, typically 1 hour
99415	Evaluation and Management	Extended office or other outpatient service by clinical staff, first hour
99416	Evaluation and Management	Extended office or other outpatient service by clinical staff, each additional 30 minutes

Procedure Code	Type of Code	Description
99417	Evaluation and Management	Prolonged office or other outpatient service by clinical staff, each 15 minutes of total time
99421	Evaluation and Management	Online digital evaluation and management service for an established patient for up to 7 days, total time 5-10 minutes
99422	Evaluation and Management	Online digital evaluation and management service for an established patient for up to 7 days, total time 11-20 minutes
99423	Evaluation and Management	Online digital evaluation and management service for an established patient for up to 7 days, total time 21 or more minutes
99441	Evaluation and Management	Telephone medical discussion with physician, 5-10 minutes
99442	Evaluation and Management	Telephone medical discussion with physician, 11-20 minutes
99443	Evaluation and Management	Telephone medical discussion with physician, 21-30 minutes
99500	Evaluation and Management	Home visit for assessment and monitoring of pregnancy, fetal heart rate, and diabetes status
99501	Evaluation and Management	Home visit for post-delivery assessment and follow-up care
99502	Evaluation and Management	Home visit for newborn care and assessment
99510	Evaluation and Management	Home visit for individual, family, or marriage counseling

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