

Psychiatric consultation to primary care practitioners coverage expansion

Effective January 1, 2009, Blue Cross and Blue Shield of Minnesota and Blue Plus are expanding eligibility for psychiatric consultations to primary care physicians. Currently, coverage is limited to members eligible for Blue Plus Minnesota Health Care Programs through Medical Assistance (MA), General Assistance Medical Care (GAMC) or MinnesotaCare. Eligibility will be extended to all Blue Cross fully insured members and self-insured members whose groups have elected this coverage. The updated policy is listed below.

Psych consult to PCP policy

Psychiatric consultation by a psychiatrist via telephone, e-mail, facsimile, or other means of communication to a primary care practitioners is subject to the following coverage criteria.

Premises underlying psychiatric consultation

Psychiatric consultations must be:

- documented in the patient record and maintained by the primary care practitioner
- between the physician and psychiatrist, compliant with HIPAA privacy and security requirements and regulations
- provided according to federal requirements and data privacy provisions

With the patient's consent, psychiatric consultation may be without the patient present.

Eligible recipients

To be eligible for psychiatric consultations to primary care practitioners, recipients:

- must be eligible for Blue Plus Minnesota Health Care Programs through Medical Assistance (MA), General Assistance Medical Care (GAMC) or MinnesotaCare; or
- must be a fully insured member, or a self-insured member whose group has elected this coverage,
- must be under the care of a primary care physician, and require the consultation between a psychiatrist and their primary care practitioner for appropriate medical or mental health treatment,
- may be any age

Eligible providers

Providers eligible to request a psychiatric consultation:

- Primary care physicians
- Nurse practitioners
- Clinical nurse specialists
- Physician assistants

Please route this bulletin to other interested staff.

Continued on back

Only psychiatrists are eligible to provide psychiatric consultation to primary care practitioners.

Provider responsibilities

Only the primary care provider may bill for psychiatric consultations to primary care practitioners.

- Primary care clinics and the consulting psychiatrists should have a contract or other formal agreement that defines the strategy for payment to the consulting psychiatrist and ensures that provider requirements and responsibilities are met.
- Providers must obtain and maintain HIPAA-compliant technology and use HIPAA-compliant privacy and security protections for the recipient. Also, providers must ensure procedures are in place to prevent a breach in privacy or cause exposure of recipient mental health records to unauthorized persons.

Covered service

Communication between a primary care provider and a psychiatrist for consultation or medical management of patients is a covered service.

Billing

Use the following HCPCS code and modifiers to report this service:

- 99499 – Unlisted evaluation and management service A narrative must be submitted as well as the time spent for this service. This should be reported in the NTE segment of the 837P electronic claim format or on the shaded service line on the HICF 1500 claim form as “(amount of time) spent in telephone consultation with (name of psychiatrist)”.
- Appropriate modifier as follows:
 - Basic Consultation: U4, HE
 - Intermediate Consultation: U4, U5, HE
 - Complex Consultation: U4, U6, HE

Add modifier -U7 when the primary care is provided by a physician extender.

The recipient must be present unless the recipient has granted permission for the consultation to take place without the recipient being present.

Authorization requirements, maximum utilization limits and thresholds do not currently apply to psychiatric consultation codes.

Note: Telephone service codes 99441-99443 and 98966-98968 are not allowed and will deny as subscriber liability if submitted.

Questions?

If you have questions, please contact provider service at (651) 662-5200 or 1-800-262-0820.

HCPCS stands for Health Care Procedure Coding System