



# Magellan Compliance Notebook

Good afternoon!

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) strives to be proactive and use education as a preventative tool to help ensure our members receive the highest quality of care through you, the provider. The Compliance Department at Magellan is committed to sending monthly e-mails to targeted providers regarding a Compliance-related subject.

*This e-mail communication is specific to your HealthChoices (Pennsylvania Medicaid) Contract with Magellan.*

This month's communication is directed to all Outpatient Mental Health and Drug & Alcohol Clinics in order to clarify the coding expectations for differentiating between Psychotherapy w/ patient and/or family member; and Family Psychotherapy (w/ or w/o patient present).

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A similar communication was distributed in 2013; however recent Magellan audits in conjunction with data mining activities to analyze the utilization of Family Psychotherapy codes suggest ongoing education is needed. The requirement for correctly coding a service can be found on the CMS 1500 claims form. Whether submitting claims electronically or on paper, providers must certify certain facts of the service provided, as well as that the information is accurate. If the claim lists a service different from the service actually rendered, then the information on the claim is not true or accurate, and is a misrepresentation of the rendered service.

In Psychotherapy w/ patient and/or family member (90832; 90834 and 90837), the focus of the service delivered is on the individual member even though the CPT code titles changed in 2013 to no longer include the word "individual" before "psychotherapy". These codes can be used with the occasional involvement of family members. With the family psychotherapy codes (90846 and 90847), the focus of the service delivery is on family dynamics or interactions – or a subset of the family such as parents or children – though the treatment is still intended for the benefit of the patient.

In some cases, a session may have included portions in which the identified member was seen alone and the remainder of the session included both the member and a family member (or a family member alone without the member present). In this case, the rendering clinician should make a determination regarding whether the focus of the session was Individual Therapy or

Family Therapy. It is the rendering clinician's responsibility to ensure that their documentation supports this determination.

***With increasing emphasis on value based payment models in the behavioral healthcare industry, it is with increasing importance that unwarranted variations in practice and billing patterns are eliminated whenever possible. To that end, following the Centers for Medicare and Medicaid Services (CMS) guidelines; as well as state and regulatory regulations that allow for consistency within service delivery and payment is of utmost importance.***

For additional information, please refer to the Current Procedural Terminology (CPT) Code book or the American Medical Association (AMA) which publishes the CPT codes and their definitions.

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At Magellan, we will continue to educate our providers with updated MA Bulletins, Regulations and other pertinent information in order to ensure Compliance.

Thank you for your ongoing hard work and dedication to our members!

Magellan of Pennsylvania's Compliance Team

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