

## Psychiatry Coding & Reimbursement Alert

### You Be the Coder: Adding Time Spent on Documentation? Think Again

**Question:** Our psychiatrist spends time before he meets any patient to review records and again spends some time after a session to update the records. Can I add up this time spent by our psychiatrist to the time that he spent to perform the psychotherapy session and arrive at the appropriate psychotherapy code to bill out? If not, can I use the CPT® code 90885 to report the time spent on the documentation?

Wichita Subscriber

**Answer:** Any time that is spent on reviewing records, preparing or updating documentation cannot be added to the time spent with the patient and/or the family members during a psychotherapy session for purposes of code selection. The time spent on reviewing records or updating documentation is considered part of the pre-service and post-service work and cannot be added to the time spent on the psychotherapy. If you look at the descriptors to the psychotherapy codes introduced in 2013, you'll observe that the time should be spent face-to-face with either the patient or with the patient's family members.

You cannot report the time spent on pre-service work or the post-service work using 90885 (Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes). Even though it appears that 90885 is a good choice to report the time spent on the documentation, payers will not typically provide any reimbursement for this code as it is not a face-to-face service provided to the patient or with a family member. For example, Medicare considers it a "bundled" service, payment for which is considered to be part of the Medicare payment made for other services.

As this time spent on documentation is considered to be built into the psychotherapy service that is performed, you cannot report it separately using 90885 or add this time to the face-to-face time spent with the patient and/or family member(s) that is used to determine the CPT® code for the psychotherapy session.

For example, if your psychiatrist spends 10 minutes prior to the psychotherapy session reviewing records and 10 minutes after the session updating records and spends 40 minutes for the actual psychotherapy session, you can only claim for the 40 minutes spent face-to-face with the patient using 90834 (Psychotherapy, 45 minutes with patient and/or family member) and not 60 minutes using 90837 (Psychotherapy, 60 minutes with patient and/or family member).