

**NEW YORK STATE  
MEDICAID PROGRAM**

**CLINICAL PSYCHOLOGY**

**PROCEDURE CODES &  
FEE SCHEDULE**

## GENERAL INFORMATION AND INSTRUCTIONS

1. The time component described in the services is defined as only that time the psychologist spends face-to-face (ie, contact time) with the patient and/or family. Non-face-to-face time, also called pre- and post-encounter time, is not to be included in calculation of the time component of the coding.
2. The fees in this schedule include payment for the face-to-face encounter with the patient and/or family, the preparation for that encounter, and the post-encounter services including analysis or review of records or tests, updating of records, and communication with the referent or patient through written reports and telephone contact.
3. Codes for individual psychotherapy are used to bill for sessions which involve the patient alone, the patient and members of his/her family or the family alone.
4. Code 90853 is to be used to bill **per patient** for one and one-half hour sessions which involve a minimum of two and a maximum of eight patients seen in the same setting at the same time for a similar therapeutic purpose.
5. Claims for either psychological testing sessions (code 96101) or individual psychotherapy sessions of greater than one hour must include supporting documentation (eg, the specific test(s) administered and administration time) which describes the extraordinary clinical circumstances requiring an extended session.
6. Listed fees are the maximum reimbursable Medicaid fees.

**PROCEDURE CODES**

		Non-Facility Fee	Facility Fee
<b>70555</b>	Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, requiring physician or psychologist administration of entire neurofunctional testing	BR	BR
90806	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an <b>office</b> (practitioner's office), approximately 45 to 50 minutes (37 minutes to 1 hour) face-to-face with the patient.	54.00	54.00
90808	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an <b>office</b> (practitioner's office), approximately 75 to 80 minutes (greater than 1 hour) face-to-face with the patient. <b>(Report Required)</b>	81.00	81.00
90812	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an <b>office</b> (practitioner's office), approximately 45 to 50 minutes (37 minutes to 1 hour) face-to-face with the patient.	58.70	54.00
90814	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an <b>office</b> (practitioner's office), approximately 75 to 80 minutes (greater than 1 hour) face-to-face with the patient. <b>(Report Required)</b>	83.82	81.00
90818	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an <b>inpatient or outpatient</b> hospital, partial hospital or residential care setting, approximately 45 to 50 minutes (37 minutes to 1 hour) face-to-face with the patient.	53.15	45.00
90821	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an <b>inpatient or outpatient</b> hospital, partial hospital or residential care setting, approximately 75 to 80 minutes (greater than 1 hour) face-to-face with the patient. <b>(Report Required)</b>	78.74	67.50

**Clinical Psychology Procedure Codes & Fee Schedule**

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		Non- Facility Fee	Facility Fee
90826	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication in an <b>inpatient or outpatient</b> hospital, partial hospital or residential care setting, approximately 45 to 50 minutes (37 minutes to 1 hour) face-to-face with the patient.	56.66	47.22
90828	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication in an <b>inpatient or outpatient</b> hospital, partial hospital or residential care setting, approximately 75 to 80 minutes (greater than 1 hour) face-to-face with the patient. <b>(Report Required)</b>	82.04	68.37
90853	Group psychotherapy (other than of a multiple-family group), with continuing diagnostic evaluation. ( 1 and ½ hours, <b>per person</b> , maximum 8 persons per group)	18.67	14.54
<b>96020</b>	Neurofunctional testing selection and administration during noninvasive imaging functional brain mapping, with test administered entirely by a physician or psychologist, with review of test results and report	BR	BR
96101	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report. <b>(See Rule 5)</b>	51.43	45.00