

Suggested Billing and Diagnosis Codes for COEs & SMART Teams

Category	CPT Code	Estimated Medicaid Reimbursement as of Jan 2025* (can vary by setting)	Descriptions	Provider Types
Evaluations	99205	\$81.65 to \$101.10 \$120.23 to \$150.28 for ages 0-20 years only	Office Visit, New Patient	MD, ARNP, ND
	99215	\$65.02 to \$83.13 \$95.86 to \$123.64 for ages 0-20 years only	Office Visit, Established Patient	MD, ARNP, ND
	G2212 (the Medicaid version of 99417)	\$17.72 to \$18.46	Prolonged services (must be used with 99205 or 99215. up to 3 hours)	MD, ARNP, ND
	90791	\$103.28 to \$121.40	Psychiatric Diagnostic Evaluation	Psychiatrist, Psychiatric ARNP, Psychologists and other mental health providers
	90792	\$96.23 to \$110.97	Psychiatric Diagnostic Evaluation with Medical Services	Psychiatrist, Psychiatric ARNP
	96130 96131 [PA for 20 years or older]	\$61.55 to \$68.63 \$42.52 to \$49.05	Psychological Testing	Psychologist
	96136	\$13.06 to \$24.43	Psychological Testing	Psychologist
	96112 96113	\$70.31 to \$70.87 \$32.26 to \$34.32	Developmental Testing	MD, ARNP, ND, Psychologist, SLP
	92521 92522 92523 92524	\$77.21 \$64.53 \$132.23 \$63.41	Speech and Hearing Evals	SLP

Last revision Jan 2025. Table adapted from Suggested Codes for COE Evaluations. Information compiled by Sophie Maleng, MN, PPCNP-BC, ARNP for the Medical Home Partnerships Project (MHPP).

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Treatment Planning	99367 [0-20 years]	\$46.07 to \$63.60		MD, ARNP, ND, Psychologist
Records Review	90885	Considered a bundled service, not payable separately.		MD, ARNP, ND, Psychologist
Add on Codes	90785	\$9.18 to \$10.32	Interactive complexity	Psychiatrist, Psychiatric ARNP, Psychologist

*The above Medicaid reimbursement rates are from the Health Care Authority fee schedules, specifically the “Physician-related/professional services fee schedules”. They can be found here: <https://www.hca.wa.gov/billers-providers-partners/prior-authorization-claims-and-billing/provider-billing-guides-and-fee-schedules>

PA - Written or Fax Prior Authorization

Evaluation and Management Time Based Billing Table (Effective January 1, 2021)

New Patient E/M CPT	Time Range	G2212/99417 Add-On		Established Patient E/M CPT	Time Range	G2212/99417 Add-On
99202	15-29 minutes	n/a		99212	10-19 minutes	n/a
99203	30-44 minutes	n/a		99213	20-29 minutes	n/a
99204	45-59 minutes	n/a		99214	30-39 minutes	n/a
99205	60-74 minutes	+1 unit for 75-89 minutes +2 units for 90-104 minutes +3 units for 105-119 minutes +4 units for 120-134 minutes +5 units for 135-149 minutes +6 units for 150-164 minutes +7 units for 165-179 minutes		99215	40-54 minutes	+1 unit for 55-69 minutes +2 units for 70-84 minutes +3 units for 85-99 minutes +4 units for 100-114 minutes +5 units for 115-129 minutes +6 units for 130-144 minutes +7 units for 145-159 minutes +8 units for 160-174 minutes +9 units for 175-189 minutes

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Diagnosis Codes

CDC ICD-10 Information: https://www.cdc.gov/nchs/icd/icd-10-cm/?CDC_AAref_Val=https://www.cdc.gov/nchs/icd/icd-10-cm.htm
World Health Organization ICD-10 Browser tool (look up codes): <https://icd.who.int/browse10/2019/en>

For first visits at the Autism Center, we often bill “**F88: Delayed Social and Emotional Development**” and have had good success in getting reimbursed. (Jen Gerds, PhD)

F84.0 Autistic disorder

Z13.41 Encounter for autism screening

If you have comments or questions, please reach out to Sophie Maleng, ARNP at sophielu@uw.edu.