

The Follow-Up After Emergency Care Department for People with Multiple Chronic Conditions - Seven Days Code List are associated office visit codes that relate to the numerator capture for the 2025 Hospital P4P FMC measure.

Service	Code Type	Code	Code Description
Office Visit	CPT	90791	Psychiatric diagnostic evaluation
Office Visit	CPT	90792	Psychiatric diagnostic evaluation with medical services
Office Visit	CPT	90832	Psychotherapy, 30 minutes with patient
Office Visit	СРТ	90833	Psychotherapy, 30 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Office Visit	СРТ	90834	Psychotherapy, 45 minutes with patient
Office Visit	СРТ	90836	Psychotherapy, 45 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Office Visit	CPT	90837	Psychotherapy, 60 minutes with patient
Office Visit	СРТ	90838	Psychotherapy, 60 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Office Visit	CPT	90839	Psychotherapy for crisis; first 60 minutes
Office Visit	СРТ	90840	Psychotherapy for crisis; each additional 30 minutes (List separately in addition to code for primary service)
Office Visit	CPT	90845	Psychoanalysis
Office Visit	CPT	90847	Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes
Office Visit	CPT	90849	Multiple-family group psychotherapy
Office Visit	CPT	90853	Group psychotherapy (other than of a multiple-family group)
Office Visit	CPT	90870	Electroconvulsive therapy (includes necessary monitoring)
Office Visit	СРТ	90875	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 30 minutes
Office Visit	СРТ	90876	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 45 minutes



Service	Code Type	Code	Code Description
Office Visit	СРТ	98960	Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient
Office Visit	СРТ	98961	Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 2-4 patients
Office Visit	СРТ	98962	Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 5-8 patients
Office Visit	СРТ	98966	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
Office Visit	СРТ	98967	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
Office Visit	СРТ	98968	Telephone assessment and management service provided by a nonphysician qualified health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion
Office Visit	СРТ	98970	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes
Office Visit	СРТ	98971	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes



Service	Code Type	Code	Code Description
Office Visit	СРТ	98972	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
Office Visit	СРТ	98980	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; first 20 minutes
Office Visit	СРТ	98981	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)
Office Visit	СРТ	99078	Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services rendered to patients in a group setting (eg, prenatal, obesity, or diabetic instructions)
Office Visit	СРТ	99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.
Office Visit	СРТ	99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
Office Visit	СРТ	99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.
Office Visit	СРТ	99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional
Office Visit	СРТ	99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 10 minutes must be met or exceeded.
Office Visit	СРТ	99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
Office Visit	СРТ	99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
Office Visit	СРТ	99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
Office Visit	СРТ	99221	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and straightforward or low level medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
Office Visit	СРТ	99222	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 55 minutes must be met or exceeded.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99223	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 75 minutes must be met or exceeded.
Office Visit	СРТ	99231	Subsequent hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and straightforward or low level of medical decision making. When using total time on the date of the encounter for code selection, 25 minutes must be met or exceeded.
Office Visit	СРТ	99232	Subsequent hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 35 minutes must be met or exceeded.
Office Visit	СРТ	99233	Subsequent hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 50 minutes must be met or exceeded.
Office Visit	СРТ	99238	Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter
Office Visit	СРТ	99239	Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter
Office Visit	СРТ	99242	Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
Office Visit	СРТ	99243	Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99244	Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
Office Visit	СРТ	99245	Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 55 minutes must be met or exceeded.
Office Visit	СРТ	99252	Inpatient or observation consultation for a new or established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 35 minutes must be met or exceeded.
Office Visit	СРТ	99253	Inpatient or observation consultation for a new or established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.
Office Visit	СРТ	99254	Inpatient or observation consultation for a new or established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.
Office Visit	СРТ	99255	Inpatient or observation consultation for a new or established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 80 minutes must be met or exceeded.
Office Visit	СРТ	99341	Home or residence visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99342	Home or residence visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
Office Visit	СРТ	99344	Home or residence visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.
Office Visit	СРТ	99345	Home or residence visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 75 minutes must be met or exceeded.
Office Visit	СРТ	99347	Home or residence visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
Office Visit	СРТ	99348	Home or residence visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
Office Visit	СРТ	99349	Home or residence visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
Office Visit	СРТ	99350	Home or residence visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99366	Medical team conference with interdisciplinary team of health care professionals, face-to-face with patient and/or family, 30 minutes or more, participation by nonphysician qualified health care professional
Office Visit	СРТ	99381	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; infant (age younger than 1 year)
Office Visit	СРТ	99382	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; early childhood (age 1 through 4 years)
Office Visit	СРТ	99383	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; late childhood (age 5 through 11 years)
Office Visit	СРТ	99384	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; adolescent (age 12 through 17 years)
Office Visit	СРТ	99385	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 18-39 years
Office Visit	СРТ	99386	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 40-64 years



Service	Code Type	Code	Code Description
Office Visit	СРТ	99387	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 65 years and older
Office Visit	СРТ	99391	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; infant (age younger than 1 year)
Office Visit	СРТ	99392	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; early childhood (age 1 through 4 years)
Office Visit	СРТ	99393	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; late childhood (age 5 through 11 years)
Office Visit	СРТ	99394	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; adolescent (age 12 through 17 years)
Office Visit	СРТ	99395	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 18-39 years



Service	Code Type	Code	Code Description
Office Visit	СРТ	99396	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 40-64 years
Office Visit	СРТ	99397	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 65 years and older
Office Visit	СРТ	99401	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
Office Visit	СРТ	99402	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes
Office Visit	СРТ	99403	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes
Office Visit	СРТ	99404	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes
Office Visit	СРТ	99408	Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes
Office Visit	СРТ	99409	Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; greater than 30 minutes
Office Visit	СРТ	99411	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 30 minutes
Office Visit	СРТ	99412	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 60 minutes
Office Visit	СРТ	99421	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes
Office Visit	СРТ	99422	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes



Service	Code Type	Code	Code Description
Office Visit	СРТ	99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
Office Visit	CPT	99429	Unlisted preventive medicine service
Office Visit	СРТ	99439	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)
Office Visit	СРТ	99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
Office Visit	СРТ	99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
Office Visit	СРТ	99443	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion



Service	Code Type	Code	Code Description
Office Visit	СРТ	99455	Work related or medical disability examination by the treating physician that includes: Completion of a medical history commensurate with the patient's condition; Performance of an examination commensurate with the patient's condition; Formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment; Development of future medical treatment plan; and Completion of necessary documentation/certificates and report.
Office Visit	СРТ	99456	Work related or medical disability examination by other than the treating physician that includes: Completion of a medical history commensurate with the patient's condition; Performance of an examination commensurate with the patient's condition; Formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment; Development of future medical treatment plan; and Completion of necessary documentation/certificates and report.
Office Visit	СРТ	99457	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes
Office Visit	СРТ	99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure)



Service	Code Type	Code	Code Description
Office Visit	СРТ	99483	Assessment of and care planning for a patient with cognitive impairment, requiring an independent historian, in the office or other outpatient, home or domiciliary or rest home, with all of the following required elements: Cognition-focused evaluation including a pertinent history and examination, Medical decision making of moderate or high complexity, Functional assessment (eg, basic and instrumental activities of daily living), including decision-making capacity, Use of standardized instruments for staging of dementia (eg, functional assessment staging test [FAST], clinical dementia rating [CDR]), Medication reconciliation and review for high-risk medications, Evaluation for neuropsychiatric and behavioral symptoms, including depression, including use of standardized screening instrument(s), Evaluation of safety (eg, home), including motor vehicle operation, Identification of caregiver(s), caregiver knowledge, caregiver needs, social supports, and the willingness of caregiver to take on caregiving tasks, Development, updating or revision, or review of an Advance Care Plan, Creation of a written care plan, including initial plans to address any neuropsychiatric symptoms, neuro-cognitive symptoms, functional limitations, and referral to community resources as needed (eg, rehabilitation services, adult day programs, support groups) shared with the patient and/or caregiver with initial education and support. Typically, 60 minutes of total time is spent on the date of the encounter.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99487	Complex chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored, moderate or high complexity medical decision making; first 60 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month.
Office Visit	СРТ	99489	Complex chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored, moderate or high complexity medical decision making; each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)
Office Visit	СРТ	99490	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99491	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.
Office Visit	СРТ	99492	Initial psychiatric collaborative care management, first 70 minutes in the first calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: outreach to and engagement in treatment of a patient directed by the treating physician or other qualified health care professional, initial assessment of the patient, including administration of validated rating scales, with the development of an individualized treatment plan, review by the psychiatric consultant with modifications of the plan if recommended, entering patient in a registry and tracking patient follow-up and progress using the registry, with appropriate documentation, and participation in weekly caseload consultation with the psychiatric consultant, and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies.



Service	Code Type	Code	Code Description
Office Visit	СРТ	99493	Subsequent psychiatric collaborative care management, first 60 minutes in a subsequent month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: tracking patient follow-up and progress using the registry, with appropriate documentation, participation in weekly caseload consultation with the psychiatric consultant, ongoing collaboration with and coordination of the patient's mental health care with the treating physician or other qualified health care professional and any other treating mental health providers, additional review of progress and recommendations for changes in treatment, as indicated, including medications, based on recommendations provided by the psychiatric consultant, provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies, monitoring of patient outcomes using validated rating scales, and relapse prevention planning with patients as they achieve remission of symptoms and/or other treatment goals and are prepared for discharge from active treatment.
Office Visit	СРТ	99494	Initial or subsequent psychiatric collaborative care management, each additional 30 minutes in a calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional (List separately in addition to code for primary procedure)
Office Visit	СРТ	99496	Transitional care management services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge, High level of medical decision making during the service period, Face-to-face visit, within 7 calendar days of discharge
Office Visit	CPT	99510	Home visit for individual, family, or marriage counseling



Service	Code Type	Code	Code Description
Office Visit	HCPCS	G0071	Payment for communication technology-based services for 5 minutes or more of a virtual (non-face-to-face) communication between an rural health clinic (RHC) or federally qualified health center (FQHC) practitioner and RHC or FQHC patient, or 5 minutes or more of remote evaluation of recorded video and/or images by an RHC or FQHC practitioner, occurring in lieu of an office visit; RHC or FQHC only (G0071)
Office Visit	HCPCS	G0155	Services of clinical social worker in home health or hospice settings, each 15 minutes (G0155)
Office Visit	HCPCS	G0176	Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more) (G0176)
Office Visit	HCPCS	G0177	Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more) (G0177)
Office Visit	HCPCS	G0396	Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and brief intervention 15 to 30 minutes (G0396)
Office Visit	HCPCS	G0397	Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and intervention, greater than 30 minutes (G0397)
Office Visit	HCPCS	G0402	Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 months of medicare enrollment (G0402)
Office Visit	HCPCS	G0409	Social work and psychological services, directly relating to and/or furthering the patient's rehabilitation goals, each 15 minutes, face-to-face; individual (services provided by a CORF qualified social worker or psychologist in a CORF) (G0409)
Office Visit	HCPCS	G0410	Group psychotherapy other than of a multiple-family group, in a partial hospitalization or intensive outpatient setting, approximately 45 to 50 minutes (G0410)
Office Visit	HCPCS	G0411	Interactive group psychotherapy, in a partial hospitalization or intensive outpatient setting, approximately 45 to 50 minutes (G0411)
Office Visit	HCPCS	G0438	Annual wellness visit; includes a personalized prevention plan of service (pps), initial visit (G0438)
Office Visit	HCPCS	G0439	Annual wellness visit, includes a personalized prevention plan of service (pps), subsequent visit (G0439)
Office Visit	HCPCS	G0443	Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes (G0443)



Service	Code Type	Code	Code Description
Office Visit	HCPCS	G0463	Hospital outpatient clinic visit for assessment and management of a patient (G0463)
Office Visit	HCPCS	G0506	Comprehensive assessment of and care planning for patients requiring chronic care management services (list separately in addition to primary monthly care management service) (G0506)
Office Visit	HCPCS	G0512	Rural health clinic or federally qualified health center (RHC/FQHC) only, psychiatric collaborative care model (psychiatric COCM), 60 minutes or more of clinical staff time for psychiatric COCM services directed by an RHC or FQHC practitioner (physician, NP, PA, or CNM) and including services furnished by a behavioral health care manager and consultation with a psychiatric consultant, per calendar month (G0512)
Office Visit	HCPCS	G2010	Remote evaluation of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment (G2010)
Office Visit	HCPCS	G2012	Brief communication technology-based service, e.g. virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion (G2012)
Office Visit	HCPCS	G2250	Remote assessment of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment (G2250)
Office Visit	HCPCS	G2251	Brief communication technology-based service, e.g. virtual check-in, by a qualified health care professional who cannot report evaluation and management services, provided to an established patient, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of clinical discussion (G2251)



Service	Code Type	Code	Code Description
Office Visit	HCPCS	G2252	Brief communication technology-based service, e.g. virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion (G2252)
Office Visit	HCPCS	H0001	Alcohol and/or drug assessment (H0001)
Office Visit	HCPCS	H0002	Behavioral health screening to determine eligibility for admission to treatment program (H0002)
Office Visit	HCPCS	H0004	Behavioral health counseling and therapy, per 15 minutes (H0004)
Office Visit	HCPCS	H0005	Alcohol and/or drug services; group counseling by a clinician (H0005)
Office Visit	HCPCS	H0007	Alcohol and/or drug services; crisis intervention (outpatient) (H0007)
Office Visit	HCPCS	H0015	Alcohol and/or drug services; intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan), including assessment, counseling; crisis intervention, and activity therapies or education (H0015)
Office Visit	HCPCS	H0016	Alcohol and/or drug services; medical/somatic (medical intervention in ambulatory setting) (H0016)
Office Visit	HCPCS	H0022	Alcohol and/or drug intervention service (planned facilitation) (H0022)
Office Visit	HCPCS	H0031	Mental health assessment, by non-physician (H0031)
Office Visit	HCPCS	H0034	Medication training and support, per 15 minutes (H0034)
Office Visit	HCPCS	H0035	Mental health partial hospitalization, treatment, less than 24 hours (H0035)
Office Visit	HCPCS	H0036	Community psychiatric supportive treatment, face-to-face, per 15 minutes (H0036)
Office Visit	HCPCS	H0037	Community psychiatric supportive treatment program, per diem (H0037)



Service	Code Type	Code	Code Description
Office Visit	HCPCS	H0039	Assertive community treatment, face-to-face, per 15 minutes (H0039)
Office Visit	HCPCS	H0040	Assertive community treatment program, per diem (H0040)
Office Visit	HCPCS	H0047	Alcohol and/or other drug abuse services, not otherwise specified (H0047)
Office Visit	HCPCS	H0050	Alcohol and/or drug services, brief intervention, per 15 minutes (H0050)
Office Visit	HCPCS	H2000	Comprehensive multidisciplinary evaluation (H2000)
Office Visit	HCPCS	H2001	Rehabilitation program, per 1/2 day (H2001)
Office Visit	HCPCS	H2010	Comprehensive medication services, per 15 minutes (H2010)
Office Visit	HCPCS	H2011	Crisis intervention service, per 15 minutes (H2011)
Office Visit	HCPCS	H2012	Behavioral health day treatment, per hour (H2012)
Office Visit	HCPCS	H2013	Psychiatric health facility service, per diem (H2013)
Office Visit	HCPCS	H2014	Skills training and development, per 15 minutes (H2014)
Office Visit	HCPCS	H2015	Comprehensive community support services, per 15 minutes (H2015)
Office Visit	HCPCS	H2016	Comprehensive community support services, per diem (H2016)
Office Visit	HCPCS	H2017	Psychosocial rehabilitation services, per 15 minutes (H2017)
Office Visit	HCPCS	H2018	Psychosocial rehabilitation services, per diem (H2018)
Office Visit	HCPCS	H2019	Therapeutic behavioral services, per 15 minutes (H2019)
Office Visit	HCPCS	H2020	Therapeutic behavioral services, per diem (H2020)
Office Visit	HCPCS	H2035	Alcohol and/or other drug treatment program, per hour (H2O35)
Office Visit	HCPCS	H2036	Alcohol and/or other drug treatment program, per diem (H2036)
Office Visit	HCPCS	S0201	Partial hospitalization services, less than 24 hours, per diem (S0201)
Office Visit	HCPCS	S9480	Intensive outpatient psychiatric services, per diem (S9480)
Office Visit	HCPCS	S9484	Crisis intervention mental health services, per hour (S9484)
Office Visit	HCPCS	S9485	Crisis intervention mental health services, per diem (S9485)
Office Visit	HCPCS	T1006	Alcohol and/or substance abuse services, family/couple counseling (T1006)
Office Visit	HCPCS	T1012	Alcohol and/or substance abuse services, skills development (T1012)
Office Visit	HCPCS	T1015	Clinic visit/encounter, all-inclusive (T1015)
Office Visit	HCPCS	T1016	Case management, each 15 minutes (T1016)
Office Visit	HCPCS	T1017	Targeted case management, each 15 minutes (T1017)
Office Visit	HCPCS	T2022	Case management, per month (T2022)



Service	Code Type	Code	Code Description
Office Visit	HCPCS	T2023	Targeted case management; per month (T2023)
Office Visit	ICD10CM	Z71.41	[Z71.41] Alcohol abuse counseling and surveillance of alcoholic
Office Visit	ICD10CM	Z71.51	[Z71.51] Drug abuse counseling and surveillance of drug abuser
	SNOMED		
Office Visit	CT US	7133001	Psychiatric day care by day (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	10470002	Electronarcosis (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	11075005	Subconvulsive electroshock therapy (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	20093000	Alcohol rehabilitation and detoxification (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	23835007	Electroconvulsive therapy (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	23915005	Combined alcohol and drug rehabilitation and detoxification (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	50357006	Evaluation and management of patient at home (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	56876005	Drug rehabilitation and detoxification (regime/therapy)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	61480009	Drug detoxification (regime/therapy)
	Edition		
Office Misit	SNOMED	C 4207001	Determination remark in the remark for also believe (regime (the many))
Office Visit	CT US Edition	64297001	Detoxication psychiatric therapy for alcoholism (regime/therapy)
	SNOMED		
Office Visit	CT US	67516001	Detoxification therapy (regime/therapy)
Office visit	Edition	07310001	Detaxined to the tapy
	SNOMED		
Office Visit	CT US	77406008	Confirmatory medical consultation (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	84251009	Comprehensive consultation (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	86013001	Periodic reevaluation and management of healthy individual (procedure)
	Edition		
255	SNOMED		
Office Visit	CT US	87106005	Combined alcohol and drug detoxification (regime/therapy)
	Edition		
Office Visit	SNOMED CT US	90526000	Initial evaluation and management of healthy individual (procedure)
Office visit	Edition	30320000	Initial evaluation and management of healthy mulvidual (procedure)
	SNOMED		
Office Visit	CT US	182969009	Dependent drug detoxification (regime/therapy)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US Edition	185317003	Telephone encounter (procedure)
	SNOMED		
Office Visit	CT US	185463005	Visit out of hours (procedure)
	Edition	100 100000	procedure,
	SNOMED		
Office Visit	CT US	185464004	Out of hours visit - not night visit (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	185465003	Weekend visit (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	209099002	History and physical examination with management of domiciliary or rest home patient (procedure)
	Edition SNOMED		
Office Visit	CT US	231079005	Multiple electroconvulsive therapy (procedure)
Office visit	Edition	2310/9003	
	SNOMED		
Office Visit	CT US	231080008	Multiple monitored electroconvulsive therapy (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	266707007	Drug addiction therapy (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	281036007	Follow-up consultation (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US Edition	284468008	Bilateral electroconvulsive therapy (procedure)
	SNOMED		
Office Visit	CT US	305345009	Admission to psychiatric day hospital (procedure)
	Edition		(processes)
	SNOMED		
Office Visit	CT US	305346005	Admission to psychogeriatric day hospital (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	305347001	Admission to elderly severely mentally ill day hospital (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	310653000	Drug addiction therapy using methadone (regime/therapy)
	Edition		
Office Visit	SNOMED CT US	313019002	First treatment in a source of electroconvulsive therapy (precedure)
Office visit	Edition	313019002	First treatment in a course of electroconvulsive therapy (procedure)
	SNOMED		
Office Visit	CT US	313020008	Subsequent treatment in a course of electroconvulsive therapy (procedure)
	Edition	313313333	cassequent treatment in a course or electrocontainte therapy (procedure)
	SNOMED		
Office Visit	CT US	314849005	Telephone contact by consultant (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	370776007	Assessment of history of substance abuse (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	370854007	Screening for substance abuse (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	385989002	Substance use therapy (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	386230005	Case management (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	386449006	Substance use treatment: alcohol withdrawal (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	386450006	Substance use treatment: drug withdrawal (regime/therapy)
	Edition		
	SNOMED	006454005	
Office Visit	CT US	386451005	Substance use treatment: overdose (regime/therapy)
	Edition		
- 65	SNOMED		
Office Visit	CT US	386472008	Telephone consultation (procedure)
	Edition		
- 65	SNOMED		
Office Visit	CT US	386473003	Telephone follow-up (procedure)
	Edition		
0.00	SNOMED	20122225	
Office Visit	CT US	391038005	Emergency mental health assessment - Part day : day care (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	391042008	Planned mental health assessment - Full day : day care (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391043003	Planned mental health assessment - Part day : day care (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391046006	Crisis/short term interventions in mental health care - Full day : day care (procedure)
	Edition		
- 65.	SNOMED		
Office Visit	CT US	391047002	Crisis/short term interventions in mental health care - Part day : day care (procedure)
	Edition		
- 65.	SNOMED		
Office Visit	CT US	391048007	Crisis/short term interventions in mental health care - Daily intensive (procedure)
	Edition		
0.00	SNOMED	201251222	
Office Visit	CT US	391054008	Emergency mental health assessment - Daily intensive (procedure)
	Edition		
0.00	SNOMED	22425522	
Office Visit	CT US	391055009	Mental health crisis resolution - Part day (procedure)
	Edition		
0.00.	SNOMED	204056005	
Office Visit	CT US	391056005	Mental health crisis resolution - Daily intensive (procedure)
	Edition		
Office Missi	SNOMED	204422202	Named bashbasis was big . Full day (and adding)
Office Visit	CT US	391133003	Mental health crisis resolution - Full day (procedure)
	Edition		



Service	Code Type	Code	Code Description
Office Visit	SNOMED CT US	391150001	General psychiatric care of older adults - Full day : day care (regime/therapy)
Office visit	Edition	331130001	deficial psychiatric care of older addits. I dif day a day care (regime/therapy)
	SNOMED		
Office Visit	CT US	391151002	General psychiatric care of older adults - Part day : day care (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	391152009	General psychiatric care of older adults - Daily intensive (regime/therapy)
	Edition SNOMED		
Office Visit	CT US	391153004	General psychiatric care of older adults - 3 to 5 contacts/week (regime/therapy)
Office visit	Edition	391133004	General psychiatric care of older addits - 5 to 5 contacts/ week (regime/ therapy)
	SNOMED		
Office Visit	CT US	391170007	General psychiatric care of older adults - 1 to 2 contacts/week (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	391185001	Early intervention in psychosis - Part day : day care (procedure)
	Edition		
Ott: //:-:+	SNOMED	201106000	Forth distance the complete in Dodde distance (or conduction)
Office Visit	CT US Edition	391186000	Early intervention in psychosis - Daily intensive (procedure)
	SNOMED		
Office Visit	CT US	391187009	Early intervention in psychosis - 3-5 contacts/week (procedure)
	Edition	21 222	, , , , , , , , , , , , , , , , , , , ,
	SNOMED		
Office Visit	CT US	391188004	Early intervention in psychosis - 1-2 contacts/week (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	391191004	Homeless mental health care - Full day : day care (procedure)
	Edition SNOMED		
Office Visit	CT US	391192006	Homeless mental health care - Part day : day care (procedure)
onice visit	Edition	331132000	procedure,
	SNOMED		
Office Visit	CT US	391194007	Homeless mental health care - Daily intensive (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391195008	Homeless mental health care - 3-5 contacts/week (procedure)
	Edition		
0.000	SNOMED	201227021	
Office Visit	CT US	391207001	Mental health addiction programs - full day: day care (procedure)
	Edition SNOMED		
Office Visit	CT US	391208006	Mental health addiction programs - part day: day care (procedure)
Office visit	Edition	331200000	part day, day care (procedure)
	SNOMED		
Office Visit	CT US	391209003	Mental health addiction programs - daily intensive (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391210008	Mental health addiction programs - 3-5 contacts/week (procedure)
	Edition		
- 65	SNOMED		
Office Visit	CT US	391211007	Mental health addiction programs - 1-2 contacts/week (procedure)
	Edition		



Service	Code Type	Code	Code Description
Office Visit	SNOMED CT US	391223001	Mental health support groups staff facilitated - 1-2 contacts/week (procedure)
Office visit	Edition	391223001	imental health support groups starr facilitated - 1-2 contacts/ week (procedure)
	SNOMED		
Office Visit	CT US	391224007	Mental health support groups staff facilitated - 1-3 contacts/month (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391225008	Mental health support groups staff facilitated - <1 contact/month (procedure)
	Edition		
Off: M:-:+	SNOMED	204220005	Devok alaciash the agenias - Full days days agent (agene advus)
Office Visit	CT US Edition	391228005	Psychological therapies - Full day : day care (procedure)
	SNOMED		
Office Visit	CT US	391229002	Psychological therapies - Part day : day care (procedure)
	Edition		(processing)
	SNOMED		
Office Visit	CT US	391232004	Psychological therapies - Daily intensive (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391233009	Psychological therapies - 3-5 contacts/week (procedure)
	Edition		
Office Visit	SNOMED CT US	391237005	Psychological therapies - 1-2 contacts/week (procedure)
Office visit	Edition	33173/003	rsychological therapies - 1-2 contacts/ week (procedure)
	SNOMED		
Office Visit	CT US	391239008	Psychological therapies - 1-3 contacts/month (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	391242002	Psychological therapies - <1 contact/month (procedure)
	Edition		
Office Visit	SNOMED	201252002	Montal bookb functional they arise. Full day, day, says (presedure)
Office Visit	CT US	391252003	Mental health functional therapies - Full day : day care (procedure)
	Edition SNOMED		
Office Visit	CT US	391254002	Mental health functional therapies - Part day : day care (procedure)
Office visit	Edition	331234002	wiental health functional therapies - Fart day . day care (procedure)
	SNOMED		
Office Visit	CT US	391255001	Mental health functional therapies - Daily intensive (procedure)
	Edition	001100001	(p. occus. c)
	SNOMED		
Office Visit	CT US	391256000	Mental health functional therapies - 3-5 contacts/wk (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391257009	Mental health functional therapies - 1-2 contacts/week (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391260002	Mental health functional therapies - 1-3 contacts/month (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	391261003	Mental health functional therapies - <1 contacts/month (procedure)
	Edition		
Office Wielt	SNOMED	404267002	Tolophono triogo on countar (nuo codura)
Office Visit	CT US	401267002	Telephone triage encounter (procedure)
	Edition		



Service	Code Type	Code	Code Description
	SNOMED		
Office Visit	CT US	414054004	Drug dependence home detoxification (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	414056002	Drug dependence self detoxification (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	414283008	Follow up substance misuse assessment (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	414501008	Initial substance misuse assessment (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	415662004	Substance misuse monitoring (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	416341003	Case management started (situation)
	Edition		
	SNOMED		
Office Visit	CT US	425604002	Case management follow up (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	439740005	Postoperative follow-up visit (procedure)
	Edition		
- 65	SNOMED		
Office Visit	CT US	445628007	Assessment using alcohol withdrawal scale (procedure)
	Edition		



Service	Code Type	Code	Code Description
Office Visit	SNOMED CT US Edition	445662007	Assessment using Addiction Research Foundation Clinical Institute Withdrawal Assessment for Alcohol (procedure)
Office Visit	SNOMED CT US Edition	450760003	Assessment using alcohol use disorders identification test (procedure)
Office Visit	SNOMED CT US Edition	704182008	Assessment using hypertension, abnormal renal/liver function, stroke, bleeding history or predisposition, labile international normalized ratio, elderly over 65, and drugs/alcohol concomitantly score (procedure)
Office Visit	SNOMED CT US Edition	707166002	Alcohol reduction program (regime/therapy)
Office Visit	SNOMED CT US Edition	711008001	Assessment of substance withdrawal (procedure)
Office Visit	SNOMED CT US Edition	713106006	Screening for drug abuse (procedure)
Office Visit	SNOMED CT US Edition	713107002	Screening for alcohol abuse (procedure)
Office Visit	SNOMED CT US Edition	713127001	Assessment of alcohol use (procedure)
Office Visit	SNOMED CT US Edition	720174008	Drug harm reduction program (regime/therapy)



Service	Code Type	Code	Code Description
0.55	SNOMED		
Office Visit	CT US Edition	720175009	Alcohol harm reduction program (regime/therapy)
	SNOMED		
Office Visit	CT US	720176005	Alcohol relapse prevention program (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	720177001	Drug relapse prevention program (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	763104007	Assessment using Christo Inventory for Substance-misuse Services (procedure)
	Edition		
Office Visit	SNOMED	762222002	Assessment using Soverity of Alaskal Danandanas Overtionnaire (presedure)
Office visit	CT US Edition	763233002	Assessment using Severity of Alcohol Dependence Questionnaire (procedure)
	SNOMED		
Office Visit	CT US	763302001	Assessment using Alcohol Use Disorders Identification Test - Consumption (procedure)
	Edition	, 00002002	у при
	SNOMED		
Office Visit	CT US	772813001	Assessment using Non-Alcoholic Fatty Liver Disease fibrosis score (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	774090004	Assessment using Alcohol Use Disorders Identification Test for Primary Care (procedure)
	Edition		
O((, -) 1,	SNOMED	774004000	Assessment of a Alaskal Bassada on Carla (assess)
Office Visit	CT US	774091000	Assessment using Alcohol Dependence Scale (procedure)
	Edition		



Service	Code Type	Code	Code Description
0.55	SNOMED		
Office Visit	CT US Edition	792901003	Drug addiction therapy using buprenorphine (regime/therapy)
	SNOMED		
Office Visit	CT US	792902005	Drug addiction therapy using buprenorphine and naloxone (regime/therapy)
	Edition		18 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	SNOMED		
Office Visit	CT US	827094004	Alcohol detoxification (regime/therapy)
	Edition		
	SNOMED		
Office Visit	CT US	865964007	Assessment using Psychiatric Research Interview for Substance and Mental Disorders (procedure)
	Edition		
Office Visit	SNOMED CT US	866149003	Annual visit (procedure)
Office visit	Edition	800149003	Affilial visit (procedure)
	SNOMED		
Office Visit	CT US	1010696002	Left unilateral electroconvulsive therapy (procedure)
	Edition		, , ,
	SNOMED		
Office Visit	CT US	1010697006	Right unilateral electroconvulsive therapy (procedure)
	Edition		
	SNOMED		
Office Visit	CT US	3391000175108	Office visit for pediatric care and assessment (procedure)
	Edition		
Office Visit	SNOMED CT US	428211000124100	Assessment of substance use (procedure)
Office visit	Edition	420211000124100	Assessment of substance use (procedure)
	EUILIOII		



Service	Code Type	Code	Code Description
Office Visit	SNOMED CT US Edition	444971000124105	Annual wellness visit (procedure)
Office Visit	SNOMED CT US Edition	456201000124103	Medicare annual wellness visit (procedure)