

District of Columbia (DC) Crosswalk of HealthySteps-Aligned Services with Billing Codes and Provider Types

The HealthySteps National Office Policy and Finance Team



About This Document

Have you ever wanted a list of the reimbursable HealthySteps (HS)-aligned services and corresponding list of providers who can render the services to assist with hiring decisions or to quickly identify “open” codes in DC? If so, this document will provide you with helpful guidance. Knowing the HS-aligned services, their associated billing codes, and the professionals eligible to render the service and/or receive insurance carrier reimbursement for each service will assist your site in understanding potential billing opportunities and may assist you in the decision-making process when hiring a HS Specialist.

The following table outlines HS-aligned services, the service types, and the provider types that can provide and/or render the services. At the bottom of the table, you will find a tally of the number of billable codes for each provider type.

In summary, the top three provider types with the most opportunities to currently bill for HS-aligned services in DC, under Medicaid are:

- Psychologists
- Licensed Independent Certified Social Workers (LICSWs)
- Licensed Professional Counselors (LPCs)

Service Billing Codes	Service Description	Physicians, Physician Assistant, Nurse Practitioner, & Certified Nurse Midwife	Psychologist	Licensed Independent Clinical Social Worker (LICSW)	Licensed Professional Counselor (LPC)	Licensed Marriage & Family Therapist (LMFT)
96110	Developmental milestone survey, speech and language delay with scoring and documentation, per standardized instrument (ASQ-3, M-CHAT-R, PEDS, SWYC, SWYC-MA)	X				
96127	Brief Emotional/Behavioral Health Screening (PHQ-9, ASQ-SE, BITSEA, SCARED, ECSA)	X	X	X	X	X
96161	Maternal Depression Screening (PHQ-9, EPDS, ACES-Caregiver focused)	X				
90791	Psychiatric Diagnostic Evaluation (no medical services)		X	X	X	X
90832/90834/90837	Psychotherapy, 30 minutes with Patient or Family Member/45 minutes with Patient or Family Member/ 60 minutes with Patient or Family Member		X	X	X	X
90846/90847	Family Psychotherapy Without Patient Present/With Patient Present		X	X	X	X
90849	Multiple Family Group Psychotherapy		X	X	X	X
90853	Group Psychotherapy (<i>other than multiple-family group</i>)		X	X	X	X
90785	Interactive Complexity		X	X	X	X
90839/90840	Psychotherapy for Crisis, first 60 minutes/each additional 30 minutes (<i>must list separately in addition to code for primary service</i>)		X	X	X	X
90887	Interpretation or explanation of results of psychiatric, or other medical examination and procedures		X	X	X	X
96156	Health Behavior Assessment or re-assessment		X			

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96158/96159	Health Behavior Intervention, Individual, face-to-face; initial 30 minutes/each additional 15 minutes		X			
96130/96131	Psychological Testing and Evaluation; first hour/each additional hour after the 1 st hour of service	X	X	X	X	X
99406/99407	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes/Intensive, greater than 10 minutes	X				
99408/99409	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; 15 – 30 minutes/ greater than 30 minutes		X	X	X	X
99401/99402 99403/99404	Preventive medicine counseling and risk factor reduction intervention; 15 minutes/30 minutes/45 minutes/ and 60 minutes		X	X	X	X
S9443	Lactation classes, per session; 15 minutes	X				
	# of Billable Codes Eligible for Reimbursement by Provider	6	14	12	12	12

Notes:

1. Psychiatric Diagnostic Evaluations, Individual, Family, Multi-Family, Group, Crisis Psychotherapy, & Interpretation or explanation of results services must be consistent with the scope of license and competency of the mental health provider. Typically, Licensed Psychiatrists can provide these services; however, DC Medicaid's BH Billing and Coding Manual does not specifically include/exclude these providers. Thus, it is highly recommended that all clinical sites contact DC Medicaid directly for provider type billing/coding requirements.
 2. Interactive Complexity must be consistent with the scope of license and competency of the mental health provider. Typically, Licensed Psychiatrists, LICSWs, LPCs, & LMFTs can provide these services; however, DC Medicaid's BH Billing and Coding Manual does not specifically include/exclude these providers. Thus, it is highly recommended that all clinical sites contact DC Medicaid directly for provider type billing/coding requirements.
 3. Lactation Services must be consistent with the scope of license and competency of provider. Typically, only non-physicians (e.g., Certified Nurse Midwives, Nurse Practitioners) registered as Certified Lactation Consultants, and/or IBLCE can bill for lactation services.
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Sources

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