

Eligible Service Description	Eligible CPT/HCPSC Code
Psychiatric interactive complexity	90785
Psychiatric diagnostic interview examination	90791, 90792
Individual psychotherapy	90832, 90833, 90834, 90836, 90837, 90838
Psychotherapy for crisis	90839, 90840
Psychoanalysis	90845
Family or group psychotherapy	90846, 90847
Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler or IPPB device	94664
Developmental screening (e.g. developmental milestone survey, speech and language delay screen), with scoring and documentation	96110
Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions); each additional 30 minutes	96113
Neurobehavioral testing	96116, 96121
Brief emotional/behavioral assessment	96127
Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s)	96130, 96131
Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s)	96132, 96133
Psychological or neuropsychological test administration and scoring, two or more tests, any method	96136, 96137, 96138, 96139

Health behavior assessment or re-assessment (e.g., health-focused clinical interview, behavioral observations, clinical decision making)	96156
Health behavior intervention, individual	96158, 96159
Patient focused health risk assessment	96160, 96161
Caregiver health risk assessment	96161
Health behavior intervention, group	96164, 96165
Health behavior intervention, family (with the patient present)	96167, 96168
Individual and group medical nutrition therapy	97802, 97083, 97084
Office or other outpatient visit or consult	99201 – 99205, 99211 – 99215
Prolonged service, inpatient or office	99354, 99355
Smoking and tobacco use cessation counseling visit	99406, 99407, G0436, G0437
Assessment of and care planning for a patient with cognitive impairment	99483
Transitional care management services	99495, 99496
Advanced care planning	99497, 99498
Individual and group diabetes self-management training services	G0108, G0109
Medical nutrition therapy; reassessment and subsequent intervention(s) for change in diagnosis, medical condition or treatment regimen	G0270
Counseling visit to discuss need for lung cancer screening using low dose CT scan	G0296
Alcohol and/or substance abuse structured assessment	G0396, G0397
Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs	G0406, G0407, G0408
Telehealth consultations, emergency department or initial inpatient	G0425, G0426, G0427
Annual wellness visits	G0438, G0439
Alcohol misuse screening, counseling	G0442, G0443
Annual depression screening	G0444
High intensity behavioral counseling to prevent sexually transmitted infection	G0445
Annual, face-to-face intensive behavioral therapy for cardiovascular disease	G0446
Behavioral counseling for obesity	G0447

Telehealth pharmacologic management	G0459
Comprehensive assessment of and care planning for patients requiring chronic care management services	G0506
Prolonged preventive service	G0513, G0514
Opioid treatment	G2086, G2087, G2088

See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area.

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