

The Follow-Up After Emergency Department Visit for Substance Use (FUA) and the Follow-Up After Emergency Department Visit for Mental Illness (FUM) Code List is associated with office visit codes that relate to the numerator capture for the 2026 Hospital P4P FUA and FUM measures.

| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA     | 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   |
| FUA     | 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  |
| FUA     | 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   |
| FUA     | Office Visit | HCPCS     | G0397 | Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and intervention, greater than 30 minutes   |
| FUA     | Office Visit | HCPCS     | G0442 | Annual alcohol misuse screening, 5 to 15 minutes  |
| FUA     | Office Visit | HCPCS     | G2011 | Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and brief intervention, 5-14 minutes  |
| FUA     | Office Visit | HCPCS     | G2067 | Medication assisted treatment, methadone; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing, if performed (provision of the services by a medicare-enrolled opioid treatment program)                          |
| FUA     | Office Visit | HCPCS     | G2068 | Medication assisted treatment, buprenorphine (oral); weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a medicare-enrolled opioid treatment program)                |
| FUA     | Office Visit | HCPCS     | G2071 | Medication assisted treatment, buprenorphine (implant removal); weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a medicare-enrolled opioid treatment program)     |
| FUA     | Office Visit | HCPCS     | G2074 | Medication assisted treatment, weekly bundle not including the drug, including substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a medicare-enrolled opioid treatment program)  |
| FUA     | Office Visit | HCPCS     | G2075 | Medication assisted treatment, medication not otherwise specified; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing, if performed (provision of the services by a medicare-enrolled opioid treatment program) |



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|---------|--------------|-----------|--------|---|
| FUA     | Office Visit | HCPCS     | G2076  | Intake activities, including initial medical examination that is conducted by an appropriately licensed practitioner and preparation of a care plan, which may be informed by administration of a standardized, evidence-based social determinants of health risk assessment to identify unmet health-related social needs, and that includes the patient's goals and mutually agreed-upon actions for the patient to meet those goals, including harm reduction interventions; the patient's needs and goals in the areas of education, vocational training, and employment; and the medical and psychiatric, psychosocial, economic, legal, housing, and other recovery support services that a patient needs and wishes to pursue, conducted by an appropriately licensed/credentialed personnel (provision of the services by a Medicare-enrolled opioid treatment program); list separately in addition to each primary code |
| FUA     | Office Visit | HCPCS     | G2077  | Periodic assessment; assessing periodically by an OTP practitioner and includes a review of MOUD dosing, treatment response, other substance use disorder treatment needs, responses and patient-identified goals, and other relevant physical and psychiatric treatment needs and goals; assessment may be informed by administration of a standardized, evidence-based social determinants of health risk assessment to identify unmet health-related social needs, or the need and interest for harm reduction interventions and recovery support services (provision of the services by a Medicare-enrolled opioid treatment program); list separately in addition to each primary code   |
| FUA     | Office Visit | HCPCS     | G2080  | Each additional 30 minutes of counseling in a week of medication assisted treatment, (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure   |
| FUA     | Office Visit | HCPCS     | G2086  | Office-based treatment for opioid use disorder, including development of the treatment plan, care coordination, individual therapy and group therapy and counseling; at least 70 minutes in the first calendar month  |
| FUA     | Office Visit | HCPCS     | G2087  | Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; at least 60 minutes in a subsequent calendar month  |
| FUA     | Office Visit | HCPCS     | H0001  | Alcohol and/or drug assessment  |
| FUA     | Office Visit | HCPCS     | H0006  | Alcohol and/or drug services; case management   |
| FUA     | Office Visit | HCPCS     | H0028  | Alcohol and/or drug prevention problem identification and referral service (e.g., student assistance and employee assistance programs), does not include assessment   |
| FUA     | Office Visit | HCPCS     | H0049  | Alcohol and/or drug screening   |
| FUA     | Office Visit | ICD10CM   | Z71.41 | Alcohol abuse counseling and surveillance of alcoholic  |



| Measure | Service      | Code Type               | Code      | Code Description   |
|---------|--------------|-------------------------|-----------|--|
| FUA     | Office Visit | ICD10CM                 | Z71.51    | Drug abuse counseling and surveillance of drug abuser  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 4266003   | Referral to drug addiction rehabilitation service (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 23915005  | Combined alcohol and drug rehabilitation and detoxification (regime/therapy)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 38670004  | Referral to alcoholism rehabilitation service (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 40823001  | Drug of abuse, quantitative screen, includes amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, methadone, methaqualone, opiates, phencyclidines and propoxyphene (procedure) |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 49474007  | Drug of abuse screen on bile (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 56876005  | Drug rehabilitation and detoxification (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 58473000  | Drug of abuse, qualitative screen (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 61480009  | Drug detoxification (regime/therapy)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 64297001  | Detoxication psychiatric therapy for alcoholism (regime/therapy)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 64792006  | Drug of abuse screen on gastric fluid (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 67516001  | Detoxification therapy (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 87106005  | Combined alcohol and drug detoxification (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 89732002  | Drug of abuse screen (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 171208001 | Alcohol consumption screening (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 182969009 | Dependent drug detoxification (regime/therapy)   |



| Measure | Service      | Code Type               | Code      | Code Description   |
|---------|--------------|-------------------------|-----------|--|
| FUA     | Office Visit | SNOMED CT US<br>Edition | 266707007 | Drug addiction therapy (regime/therapy)                      |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 314077000 | Drugs of abuse urine screening test (procedure)              |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 370854007 | Screening for substance abuse (procedure)                    |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 385989002 | Substance use therapy (regime/therapy)                       |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 386449006 | Substance use treatment: alcohol withdrawal (regime/therapy) |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 386450006 | Substance use treatment: drug withdrawal (regime/therapy)    |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 386451005 | Substance use treatment: overdose (regime/therapy)           |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 390857005 | Referral to community alcohol team (procedure)               |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 391281002 | Mental health assessment (procedure)                         |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 396150002 | Referral for substance abuse (procedure)                     |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 401266006 | Referral to drug abuse counselor (procedure)                 |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 410223002 | Mental health care assessment (procedure)                    |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 410229003 | Mental health screening assessment (procedure)               |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 414054004 | Drug dependence home detoxification (regime/therapy)         |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 414056002 | Drug dependence self detoxification (regime/therapy)         |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 414283008 | Follow up substance misuse assessment (regime/therapy)       |



| Measure | Service      | Code Type               | Code      | Code Description  |
|---------|--------------|-------------------------|-----------|---|
| FUA     | Office Visit | SNOMED CT US<br>Edition | 414501008 | Initial substance misuse assessment (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 415662004 | Substance misuse monitoring (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 417096006 | Referral to community drug and alcohol team (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 417699000 | Referral to drug treatment center (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 423416000 | Substance use cessation case management (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 431260004 | Referral to specialist alcohol treatment service (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 439320000 | Screening for drug of abuse in meconium (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 445628007 | Assessment using alcohol withdrawal scale (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 450760003 | Assessment using alcohol use disorders identification test (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 703257008 | Assessment of cause of psychotic and behavioral symptoms (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>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) |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 713106006 | Screening for drug abuse (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 713107002 | Screening for alcohol abuse (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 713127001 | Assessment of alcohol use (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 713132000 | Assessment of drug use (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 713137006 | Assessment of stress level (procedure)  |



| Measure | Service      | Code Type               | Code            | Code Description  |
|---------|--------------|-------------------------|-----------------|---|
| FUA     | Office Visit | SNOMED CT US<br>Edition | 719757009       | Referral for brief intervention for substance abuse (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 720174008       | Drug harm reduction program (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 720177001       | Drug relapse prevention program (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 763104007       | Assessment using Christo Inventory for Substance-misuse Services (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 763233002       | Assessment using Severity of Alcohol Dependence Questionnaire (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 772813001       | Assessment using Non-Alcoholic Fatty Liver Disease fibrosis score (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 774090004       | Assessment using Alcohol Use Disorders Identification Test for Primary Care (procedure)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 792901003       | Drug addiction therapy using buprenorphine (regime/therapy)   |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 792902005       | Drug addiction therapy using buprenorphine and naloxone (regime/therapy)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 865964007       | Assessment using Psychiatric Research Interview for Substance and Mental Disorders (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 1254709001      | Referral to substance use disorder treatment program (procedure)  |
| FUA     | Office Visit | SNOMED CT US<br>Edition | 428211000124100 | Assessment of substance use (procedure)   |
| FUA/FUM | Office Visit | СРТ                     | 90791           | Psychiatric diagnostic evaluation   |
| FUA/FUM | Office Visit | СРТ                     | 90792           | Psychiatric diagnostic evaluation with medical services   |
| FUA/FUM | Office Visit | СРТ                     | 90832           | Psychotherapy, 30 minutes with patient  |
| FUA/FUM | 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) |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | Office Visit | СРТ       | 90834 | Psychotherapy, 45 minutes with patient  |
| FUA/FUM | 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)   |
| FUA/FUM | Office Visit | СРТ       | 90837 | Psychotherapy, 60 minutes with patient  |
| FUA/FUM | 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)   |
| FUA/FUM | Office Visit | СРТ       | 90839 | Psychotherapy for crisis; first 60 minutes  |
| FUA/FUM | Office Visit | СРТ       | 90840 | Psychotherapy for crisis; each additional 30 minutes (List separately in addition to code for primary service)  |
| FUA/FUM | Office Visit | СРТ       | 90845 | Psychoanalysis  |
| FUA/FUM | Office Visit | СРТ       | 90847 | Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes  |
| FUA/FUM | Office Visit | СРТ       | 90849 | Multiple-family group psychotherapy   |
| FUA/FUM | Office Visit | СРТ       | 90853 | Group psychotherapy (other than of a multiple-family group)   |
| FUA/FUM | 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            |
| FUA/FUM | 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            |
| FUA/FUM | 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 |
| FUA/FUM | 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       |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | 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   |
| FUA/FUM | 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  |
| FUA/FUM | 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 |
| FUA/FUM | 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 |
| FUA/FUM | 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   |
| FUA/FUM | 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 [2]  |
| FUA/FUM | 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   |
| FUA/FUM | 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  |
| FUA/FUM | 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)  |
| FUA/FUM | 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)   |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | 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.                                  |
| FUA/FUM | 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.                                     |
| FUA/FUM | 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.                                |
| FUA/FUM | 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.                                    |
| FUA/FUM | 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   |
| FUA/FUM | 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.                         |
| FUA/FUM | 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.                            |
| FUA/FUM | 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.                       |
| FUA/FUM | 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.                           |
| FUA/FUM | 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. |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | 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.                  |
| FUA/FUM | 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.                      |
| FUA/FUM | 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. |
| FUA/FUM | 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.               |
| FUA/FUM | 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.                   |
| FUA/FUM | Office Visit | СРТ       | 99238 | Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter   |
| FUA/FUM | Office Visit | СРТ       | 99239 | Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter   |
| FUA/FUM | 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.   |
| FUA/FUM | 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.  |
| FUA/FUM | 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.   |



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|---------|--------------|-----------|-------|--|
| FUA/FUM | 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.              |
| FUA/FUM | 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.              |
| FUA/FUM | 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.                 |
| FUA/FUM | 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.            |
| FUA/FUM | 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.                |
| FUA/FUM | 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.          |
| FUA/FUM | 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.             |
| FUA/FUM | 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.        |
| FUA/FUM | 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             |
| FUA/FUM | 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. |
| FUA/FUM | 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.    |



| Measure | Service      | Code Type | Code  | Code Description   |
|---------|--------------|-----------|-------|--|
| FUA/FUM | 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.                               |
| FUA/FUM | 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.                                   |
| FUA/FUM | 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)            |
| FUA/FUM | 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)               |
| FUA/FUM | 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  |
| FUA/FUM | 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  |
| FUA/FUM | 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                                 |
| FUA/FUM | 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) |
| FUA/FUM | 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)    |
| FUA/FUM | 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                             |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | 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              |
| FUA/FUM | 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       |
| FUA/FUM | Office Visit | СРТ       | 99401 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes  |
| FUA/FUM | Office Visit | СРТ       | 99402 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes  |
| FUA/FUM | Office Visit | СРТ       | 99403 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes  |
| FUA/FUM | Office Visit | СРТ       | 99404 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes  |
| FUA/FUM | 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   |
| FUA/FUM | 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   |
| FUA/FUM | 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   |
| FUA/FUM | 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  |
| FUA/FUM | 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   |
| FUA/FUM | 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   |
| FUA/FUM | 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) |



| Measure | Service      | Code Type | Code  | Code Description   |
|---------|--------------|-----------|-------|--|
| FUA/FUM | 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. |
| FUA/FUM | 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.   |



| Measure | Service      | Code Type | Code  | Code Description   |
|---------|--------------|-----------|-------|--|
| FUA/FUM | 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. |
| FUA/FUM | 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)  |
| FUA/FUM | Office Visit | СРТ       | 99510 | Home visit for individual, family, or marriage counseling  |
| FUA/FUM | Office Visit | HCPCS     | G0155 | Services of clinical social worker in home health or hospice settings, each 15 minutes   |
| FUA/FUM | 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)  |
| FUA/FUM | 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)   |
| FUA/FUM | 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)   |
| FUA/FUM | 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  |
| FUA/FUM | Office Visit | HCPCS     | G0411 | Interactive group psychotherapy, in a partial hospitalization or intensive outpatient setting, approximately 45 to 50 minutes  |
| FUA/FUM | Office Visit | HCPCS     | G0463 | Hospital outpatient clinic visit for assessment and management of a patient  |



| Measure | Service      | Code Type | Code  | Code Description  |
|---------|--------------|-----------|-------|---|
| FUA/FUM | 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   |
| FUA/FUM | 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  |
| FUA/FUM | 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  |
| FUA/FUM | 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                          |
| FUA/FUM | 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 |
| FUA/FUM | Office Visit | HCPCS     | H0002 | Behavioral health screening to determine eligibility for admission to treatment program   |
| FUA/FUM | Office Visit | HCPCS     | H0004 | Behavioral health counseling and therapy, per 15 minutes  |
| FUA/FUM | Office Visit | HCPCS     | H0024 | Behavioral health prevention information dissemination service (one-way direct or non-direct contact with service audiences to affect knowledge and attitude)   |
| FUA/FUM | Office Visit | HCPCS     | H0025 | Behavioral health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior)  |
| FUA/FUM | Office Visit | HCPCS     | H0031 | Mental health assessment, by non-physician  |
| FUA/FUM | Office Visit | HCPCS     | H0034 | Medication training and support, per 15 minutes   |



| Measure | Service      | Code Type | Code  | Code Description   |
|---------|--------------|-----------|-------|--|
| FUA/FUM | Office Visit | HCPCS     | H0035 | Mental health partial hospitalization, treatment, less than 24 hours     |
| FUA/FUM | Office Visit | HCPCS     | H0036 | Community psychiatric supportive treatment, face-to-face, per 15 minutes |
| FUA/FUM | Office Visit | HCPCS     | H0037 | Community psychiatric supportive treatment program, per diem             |
| FUA/FUM | Office Visit | HCPCS     | H0038 | Self-help/peer services, per 15 minutes                                  |
| FUA/FUM | Office Visit | HCPCS     | H0039 | Assertive community treatment, face-to-face, per 15 minutes              |
| FUA/FUM | Office Visit | HCPCS     | H0040 | Assertive community treatment program, per diem                          |
| FUA/FUM | Office Visit | HCPCS     | H0046 | Mental health services, not otherwise specified                          |
| FUA/FUM | Office Visit | HCPCS     | H2000 | Comprehensive multidisciplinary evaluation                               |
| FUA/FUM | Office Visit | HCPCS     | H2001 | Rehabilitation program, per 1/2 day                                      |
| FUA/FUM | Office Visit | HCPCS     | H2010 | Comprehensive medication services, per 15 minutes                        |
| FUA/FUM | Office Visit | HCPCS     | H2011 | Crisis intervention service, per 15 minutes                              |
| FUA/FUM | Office Visit | HCPCS     | H2012 | Behavioral health day treatment, per hour                                |
| FUA/FUM | Office Visit | HCPCS     | H2013 | Psychiatric health facility service, per diem                            |
| FUA/FUM | Office Visit | HCPCS     | H2014 | Skills training and development, per 15 minutes                          |
| FUA/FUM | Office Visit | HCPCS     | H2015 | Comprehensive community support services, per 15 minutes                 |
| FUA/FUM | Office Visit | HCPCS     | H2016 | Comprehensive community support services, per diem                       |



| Measure | Service      | Code Type               | Code     | Code Description   |
|---------|--------------|-------------------------|----------|--|
| FUA/FUM | Office Visit | HCPCS                   | H2017    | Psychosocial rehabilitation services, per 15 minutes   |
| FUA/FUM | Office Visit | HCPCS                   | H2018    | Psychosocial rehabilitation services, per diem   |
| FUA/FUM | Office Visit | HCPCS                   | H2019    | Therapeutic behavioral services, per 15 minutes  |
| FUA/FUM | Office Visit | HCPCS                   | H2020    | Therapeutic behavioral services, per diem  |
| FUA/FUM | Office Visit | HCPCS                   | H2023    | Supported employment, per 15 minutes   |
| FUA/FUM | Office Visit | HCPCS                   | S0201    | Partial hospitalization services, less than 24 hours, per diem                               |
| FUA/FUM | Office Visit | HCPCS                   | S9445    | Patient education, not otherwise classified, non-physician provider, individual, per session |
| FUA/FUM | Office Visit | HCPCS                   | S9480    | Intensive outpatient psychiatric services, per diem  |
| FUA/FUM | Office Visit | HCPCS                   | S9484    | Crisis intervention mental health services, per hour   |
| FUA/FUM | Office Visit | HCPCS                   | S9485    | Crisis intervention mental health services, per diem   |
| FUA/FUM | Office Visit | HCPCS                   | T1012    | Alcohol and/or substance abuse services, skills development                                  |
| FUA/FUM | Office Visit | HCPCS                   | T1015    | Clinic visit/encounter, all-inclusive  |
| FUA/FUM | Office Visit | HCPCS                   | T1016    | Case management, each 15 minutes   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 7133001  | Psychiatric day care by day (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 50357006 | Evaluation and management of patient at home (procedure)                                     |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 77406008 | Confirmatory medical consultation (procedure)  |



| Measure | Service      | Code Type               | Code      | Code Description   |
|---------|--------------|-------------------------|-----------|--|
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 84251009  | Comprehensive consultation (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 86013001  | Periodic reevaluation and management of healthy individual (procedure)                           |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 90526000  | Initial evaluation and management of healthy individual (procedure)                              |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 185317003 | Telephone encounter (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 185463005 | Visit out of hours (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 185464004 | Out of hours visit - not night visit (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 185465003 | Weekend visit (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 209099002 | History and physical examination with management of domiciliary or rest home patient (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 281036007 | Follow-up consultation (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 305345009 | Admission to psychiatric day hospital (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 305346005 | Admission to psychogeriatric day hospital (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 305347001 | Admission to elderly severely mentally ill day hospital (procedure)                              |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 314849005 | Telephone contact by consultant (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 386472008 | Telephone consultation (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 386473003 | Telephone follow-up (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391038005 | Emergency mental health assessment - Part day : day care (procedure)                             |



| Measure | Service      | Code Type               | Code      | Code Description  |
|---------|--------------|-------------------------|-----------|---|
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391042008 | Planned mental health assessment - Full day : day care (procedure)                      |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391043003 | Planned mental health assessment - Part day : day care (procedure)                      |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391046006 | Crisis/short term interventions in mental health care - Full day : day care (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391047002 | Crisis/short term interventions in mental health care - Part day : day care (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391048007 | Crisis/short term interventions in mental health care - Daily intensive (procedure)     |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391054008 | Emergency mental health assessment - Daily intensive (procedure)                        |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391055009 | Mental health crisis resolution - Part day (procedure)                                  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391056005 | Mental health crisis resolution - Daily intensive (procedure)                           |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391133003 | Mental health crisis resolution - Full day (procedure)                                  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391150001 | General psychiatric care of older adults - Full day : day care (regime/therapy)         |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391151002 | General psychiatric care of older adults - Part day : day care (regime/therapy)         |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391152009 | General psychiatric care of older adults - Daily intensive (regime/therapy)             |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391153004 | General psychiatric care of older adults - 3 to 5 contacts/week (regime/therapy)        |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391170007 | General psychiatric care of older adults - 1 to 2 contacts/week (regime/therapy)        |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391185001 | Early intervention in psychosis - Part day : day care (procedure)                       |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391186000 | Early intervention in psychosis - Daily intensive (procedure)                           |



| Measure | Service      | Code Type               | Code      | Code Description  |
|---------|--------------|-------------------------|-----------|---|
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391187009 | Early intervention in psychosis - 3-5 contacts/week (procedure)                 |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391188004 | Early intervention in psychosis - 1-2 contacts/week (procedure)                 |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391191004 | Homeless mental health care - Full day : day care (procedure)                   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391192006 | Homeless mental health care - Part day : day care (procedure)                   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391194007 | Homeless mental health care - Daily intensive (procedure)                       |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391195008 | Homeless mental health care - 3-5 contacts/week (procedure)                     |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391207001 | Mental health addiction programs - full day: day care (procedure)               |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391208006 | Mental health addiction programs - part day: day care (procedure)               |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391209003 | Mental health addiction programs - daily intensive (procedure)                  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391210008 | Mental health addiction programs - 3-5 contacts/week (procedure)                |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391211007 | Mental health addiction programs - 1-2 contacts/week (procedure)                |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391223001 | Mental health support groups staff facilitated - 1-2 contacts/week (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391224007 | Mental health support groups staff facilitated - 1-3 contacts/month (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391225008 | Mental health support groups staff facilitated - <1 contact/month (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391228005 | Psychological therapies - Full day : day care (procedure)                       |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391229002 | Psychological therapies - Part day : day care (procedure)                       |



| Measure | Service      | Code Type               | Code          | Code Description   |
|---------|--------------|-------------------------|---------------|--|
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391232004     | Psychological therapies - Daily intensive (procedure)                |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391233009     | Psychological therapies - 3-5 contacts/week (procedure)              |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391237005     | Psychological therapies - 1-2 contacts/week (procedure)              |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391239008     | Psychological therapies - 1-3 contacts/month (procedure)             |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391242002     | Psychological therapies - <1 contact/month (procedure)               |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391252003     | Mental health functional therapies - Full day : day care (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391254002     | Mental health functional therapies - Part day : day care (procedure) |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391255001     | Mental health functional therapies - Daily intensive (procedure)     |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391256000     | Mental health functional therapies - 3-5 contacts/wk (procedure)     |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391257009     | Mental health functional therapies - 1-2 contacts/week (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391260002     | Mental health functional therapies - 1-3 contacts/month (procedure)  |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 391261003     | Mental health functional therapies - <1 contacts/month (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 401267002     | Telephone triage encounter (procedure)                               |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 439740005     | Postoperative follow-up visit (procedure)                            |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 866149003     | Annual visit (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 3391000175108 | Office visit for pediatric care and assessment (procedure)           |



| Measure | Service      | Code Type               | Code            | Code Description  |
|---------|--------------|-------------------------|-----------------|---|
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 444971000124105 | Annual wellness visit (procedure)   |
| FUA/FUM | Office Visit | SNOMED CT US<br>Edition | 456201000124103 | Medicare annual wellness visit (procedure)  |
| FUM     | Office Visit | СРТ                     | 90870           | Electroconvulsive therapy (includes necessary monitoring)   |
| FUM     | Office Visit | HCPCS                   | H0017           | Behavioral health; residential (hospital residential treatment program), without room and board, per diem   |
| FUM     | Office Visit | HCPCS                   | H0018           | Behavioral health; short-term residential (non-hospital residential treatment program), without room and board, per diem  |
| FUM     | Office Visit | HCPCS                   | H0019           | Behavioral health; long-term residential (non-medical, non-acute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem |
| FUM     | Office Visit | HCPCS                   | T2048           | Behavioral health; long-term care residential (non-acute care in a residential treatment program where stay is typically longer than 30 days), with room and board, per diem            |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 10470002        | Electronarcosis (procedure)   |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 11075005        | Subconvulsive electroshock therapy (procedure)  |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 23835007        | Electroconvulsive therapy (procedure)   |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 231079005       | Multiple electroconvulsive therapy (procedure)  |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 231080008       | Multiple monitored electroconvulsive therapy (procedure)  |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 284468008       | Bilateral electroconvulsive therapy (procedure)   |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 313019002       | First treatment in a course of electroconvulsive therapy (procedure)  |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 313020008       | Subsequent treatment in a course of electroconvulsive therapy (procedure)   |
| FUM     | Office Visit | SNOMED CT US<br>Edition | 1010696002      | Left unilateral electroconvulsive therapy (procedure)   |



| Measure | Service      | Code Type               | Code       | Code Description                                       |
|---------|--------------|-------------------------|------------|--|
| FUM     | Office Visit | SNOMED CT US<br>Edition | 1010697006 | Right unilateral electroconvulsive therapy (procedure) |