

Psychotropic Pharmacologic Management

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1.0 DESCRIPTION

Pharmacologic management, including prescription and review of medication, **when performed** with **or without** psychotherapy **services**.

2.0 POLICY

2.1 In 2013, the American Medical Association (AMA) made significant revisions to the Current Procedural Terminology (CPT) codes regarding behavioral health services. Beginning January 1, 2013, psychotropic pharmacologic management services can be billed in one of two ways depending on the type of provider and the services being rendered:

2.1.1 Physicians and certified psychiatric nurse specialists permitted to utilize Evaluation and Management (E&M) codes providing psychotropic pharmacologic management with or without psychotherapy services should use the appropriate E&M code as described in the current CPT manual.

Note: Office visits for psychotropic pharmacologic management **provided without psychotherapy** are routine medical services and do not count against the two visits per week or the initial **eight** visits for psychotherapy.

2.1.2 Prescribing psychologists providing psychotropic pharmacologic management in conjunction with psychotherapy services (when the psychologist is authorized to prescribe in their state; for example, New Mexico and Louisiana) should use CPT¹ code 90863 as an add-on code to the primary psychotherapy service as described in the current CPT manual. Other providers (i.e., physicians or Certified Psychiatric Nurse Specialists [CPNSs]) should not utilize this CPT code. See also [Chapter 11, Section 3.7](#), regarding TRICARE's definition of CPNS.

2.2 The allowable charge for psychotropic pharmacologic management shall be based on the CHAMPUS Maximum Allowable Charge (CMAC) methodology.

3.0 EFFECTIVE DATE

January 1, 2013.

- END -

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