

Here is some of the information relative to group psychotherapy. It is evolving as we go. This is from APA Division 49.

There will be specialists who utilize group therapy who may not have access to AGPA or Division 49 as they do not identify as group therapists.

APA Practice Directorate has been working diligently behind the scenes to advocate with CMS at the Federal level, as well as with State regulators and private payers for telehealth services for psychotherapy, psychological and neuropsychological testing, and for the Health Behavior and Assessment codes. However, the rules regarding group therapy and telehealth are still in flux at the Federal and State levels. APA Practice Directorate has been working with representatives from Division 49 to resolve this. Here is what we know today. Please see the following as a “living document” that will still require you to check for updates.

1. Medicaid, which varies State by State in what it will reimburse, is something you will need to check in your home State. In Ohio, for example, Group Psychotherapy codes are allowed (<https://medicaid.ohio.gov/Portals/0/For%20Ohioans/Telehealth/ODM-Telehealth-FAQs.pdf>), but in other States, they may not be. APA is currently embarking on a State advocacy campaign around this specific issue.
2. Medicare is allowing telehealth for individual psychotherapy codes but does not currently allow Group Psychotherapy (90853 with modifiers) to be used as a code for telehealth. APA Practice Directorate sent a letter to CMS this week requesting group psychotherapy be added to the list. We are waiting on a reply. This impacts PHP/IOP programs and other major services for those covered under Medicare. See link for Medicare telehealth information <https://www.apaservices.org/practice/reimbursement/government/medicare-telehealth-temporary-changes>
3. The Health Behavior Assessment and Intervention Group codes (96164 & 96165) are currently allowable for telehealth under Medicare. They cover groups that are designed provide promotion of functional improvement, minimizing psychological and/ or psychosocial barriers to recovery, and management of and improved coping with medical conditions. The patient’s primary diagnosis is physical in nature and the focus of the intervention is on factors complicating medical conditions and treatments. Clarification on Health and Behavior Codes can be found at <https://www.apaservices.org/practice/reimbursement/billing/new-codes>. Please check this guide carefully as it offers cautions on when to use and not use the code.
4. APA has made public what is normally a member-only service – an extensive guide to telehealth. It can be found at <https://www.apa.org/members/your-growth/practice-management/telepsychology>. It includes checklists and guides to telehealth.
5. Insurance companies are offering different levels of clarity around coding depending on the company. Some are very specific (for example, Aetna does explicitly allow Group Psychotherapy as a telehealth code), while others are more vague. If the payer allows group via telehealth, you will use the same CPT code and then will also list 02 as the place of service (POS) or they may require you to add a modifier of GT or 95. There is great variation across insurers, so you will need to verify with your payers.