If the member’s subscriber contract excludes coverage for a specific service it is not covered under that contract. In such cases, medical policy criteria are not applied.

Medical policies apply to commercial and Safety Net products only when a contract benefit for the specific service exists.

Medical policies only apply to Medicare products when a contract benefit exists and where there are no National or Local Medicare coverage decision for the specific service.

POLICY STATEMENT:

I. Psychological testing is medically appropriate only when there is a strong indication that significant, useful information that would impact the patient’s care and treatment would be generated from such testing.

II. Psychological testing is medically appropriate following evaluation and recommendation by a licensed Behavioral Health provider, according to the terms of the member’s contract, for any one of the following reasons:
   A. To rule-in or rule-out the presence of a thought disorder or other serious psychiatric diagnosis; or
   B. To make a psychiatric diagnosis which a provider has been unable to make by other methods.

III. Psychological testing is medically appropriate following evaluation and recommendation by a licensed Behavioral Health provider, according to the terms of the member’s contract, or developmental pediatrician to diagnose an intellectual disability.

IV. The routine use of psychological testing is considered not medically necessary for purposes of diagnosing any of the following conditions, as more suitable approaches are available:
   A. Autism spectrum disorders;
   B. Attention deficit disorder;
   C. Attention deficit hyperactivity disorder; or
   D. Tourette’s syndrome.

V. The routine use of psychological testing as screening tool or as part of the psychological evaluation prior to a complex surgical procedure (e.g., bariatric surgery) or for a complex medical condition is considered not medically necessary.

Refer to Corporate Medical Policy #3.01.01 regarding Neuropsychological Testing.

POLICY GUIDELINES:

I. Psychological testing is considered not medically necessary if it has been performed in the last 12 months.

II. Psychological testing is ineligible for coverage when the testing is primarily for the purpose of non-treatment related issues (e.g., routine evaluation of occupational or career aptitudes).

III. Psychological testing performed as simple self-administrated or self-scored inventories, screening tests (e.g., AIMS, Folestein Mini-Mental Status Exam) or similar tests are considered inclusive of an Evaluation and Management service and are not separately payable as psychological testing.

IV. Psychological testing, when done for any of the following reasons, are usually contractual exclusions and ineligible for coverage:
   A. Educational or vocational purposes that are primarily related to employment; or
   B. While psychological testing may be an appropriate test for a learning disability or for a developmental disability, this is the responsibility of the child’s school district.
DESCRIPTION:

Psychological testing is an evaluation to determine the extent and nature of a mental illness. It may be used to rule-in or rule-out the presence of a thought disorder or other serious psychiatric diagnosis that has been unable to be made by other methods. Psychological testing consists of a set of tasks or questions intended to elicit particular types of behavior when presented under standardized conditions, and intended to yield scores that will have desirable psychometric properties, such as acceptable levels of reliability and validity. Tests include standardized aptitude and achievement instruments, diagnostic and evaluative devices, interest inventories, personality inventories, and projective instruments.

RATIONALE:

Psychological testing has proven to be beneficial in a variety of ways such as providing objective information helpful to, not only accurately diagnose the nature of the problem, but to provide recommendations and strategies to address the problem.

The American Academy of Pediatrics clinical practice guidelines and the practice parameter from the American Academy of Child and Adolescent Psychiatry related to the diagnosis and evaluation of ADHD state neuropsychological and psychological test batteries are not routinely indicated to make a diagnosis unless there are coexisting conditions that may complicate a routine assessment. Uncomplicated cases of ADD or ADHD are best diagnosed through a careful history, parent and teacher reports, and the use of structured clinical interviews.

Psychological testing beyond a standard parent interview and direct structured behavioral observation is rarely needed for diagnosing autism (practice parameter for screening and diagnosis of autism from the American Academy of Neurology and the Child Neurology Society).

Patients with complex medical conditions or patients contemplating a complex surgical procedure such as bariatric surgery may require a psychological/psychiatric evaluation to determine an underlying psychopathology that could hinder treatment plans. A standard psychiatric evaluation provides a sufficient assessment in most instances, without the need of the complete test battery involved in psychological testing.

CODES: Number Description

Eligibility for reimbursement is based upon the benefits set forth in the member's subscriber contract.

CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.

Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.

CPT: 96101 Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI, Rorschach, WAIS), per hour of the psychologist’s or physician’s time, both face to face time with the patient and time interpreting test results and preparing the report

96102 Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI and WAIS), with qualified health care professional interpretation and report, administered by technician, per hour of technician time, face to face

96103 Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI), administered by a computer, with qualified health care professional interpretation and report

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HCPCS: No code

REVENUE: 918 Psychiatric/Psychological Services-Testing
ICD9: Multiple diagnosis codes

ICD10: Multiple diagnosis codes

REFERENCES:


* Key articles

KEY WORDS:
Psychological testing.

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CMS COVERAGE FOR MEDICARE-RISK MEMBERS

There is currently a Local Coverage Determination (LCD) for Outpatient Psychiatry and Psychology Services Mental Health Services that addresses psychological testing. Please refer to the following LCD website for Medicare Members: http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=26895&ContrId=298&ver=103&ContrVer=1&CntrcrSelected=298*1&Cntrctr=298&name=National+Government+Services%2c+Inc.+(13201%2c+A+and+B+and+HHH+MAC%2c+J+-+K)&s=All&DocType=Active&bc=AggAAAIAAAAAA%3d%3d&.