Behavioral Health Codes and use of Modifier HQ



Please note that the following list is not exhaustive and reflects information available as of the date of this letter. For complete descriptions of the codes and the most current information regarding the appropriate use of these codes listed below, please refer to the official CPT and HCPCS handbooks.

Description	HQ Modifier Use
Interactive complexity code	Service ineligible to
	be performed in a
	group setting
	Service ineligible to
sychiatric diagnostic evaluation	be performed in a
	group setting
	Service ineligible to
sychotherapy	be performed in a
	group setting
	Service ineligible to
amily Psychotherapy	be performed in a
	group setting
	HQ not required,
Multiple-family group psychotherapy	Group is in the
	description
	HQ not required,
Group psychotherapy	Group is in the
	description
	Service ineligible to
anscranial magnetic stimulation treatment	be performed in a
	group setting
	Service ineligible to
Environmental intervention for medical management	be performed in a
	group setting
	Service ineligible to
Consultation with family	be performed in a
	group setting
plicted Service and Procedure Extended Outrooch	Service ineligible to
Support	be performed in a
	group setting
	sychiatric diagnostic evaluation sychotherapy amily Psychotherapy ultiple-family group psychotherapy roup psychotherapy anscranial magnetic stimulation treatment nvironmental intervention for medical management pnsultation with family nlisted Service and Procedure Extended Outreach

Code	Description	HQ Modifier Use
96130- 96131	Psychological testing evaluation services	Service ineligible to
		be performed in a
		group setting
96136-		Service ineligible to
96167	Psychological or neuropsychological test	be performed in a
30107		group setting
96202-		HQ not required,
96203	Multiple-family group psychotherapy	Group is in the
30203		description
97151-		Service ineligible to
97153,	Behavior identification assessment/treatment	be performed in a
97155		group setting
	Group behavior treatment by protocol administered by	HQ not required,
97154	technician, each 15 minutes, per recipient	Group is in the
	technician, each 13 minutes, per recipient	description
	Family behavior treatment guidance administered by	Service ineligible to
97156	qualified health care professional, each 15 minutes, single	be performed in a
	family	group setting
	Eamily behavior treatment guidance administered by	HQ not required,
97157	Family behavior treatment guidance administered by qualified health care professional, 15 minutes, per family	Group is in the
	qualified fleatiff care professional, 13 millutes, per family	description
	ABA - Group adaptive behavior treatment with protocol modification administered by physician or other QHP	HQ not required,
97158		Group is in the
	modification administered by physician of other will	description
97810-		Service ineligible to
97814		be performed in a
37014		group setting
98966-	Telephone assessment and management service	Service ineligible to be
98968	provided by a qualified nonphysician health care	performed in a group
36308	professional	setting
99202- 99215	Office or other outpatient visit for the evaluation and management	Service ineligible to be
		performed in a group
		setting
99341-	Home visit for the evaluation and management	Service ineligible to be
99350		performed in a group
		setting

Code	Description	HQ Modifier Use
99354- 99359, 99415- 99417	Prolonged service(s)	Service ineligible to be performed in a group setting
99366- 99368	Medical team conference	Service ineligible to be performed in a group setting
99407	Smoking and tobacco use cessation counseling visit, intensive, greater than 10 minutes	Service ineligible to be performed in a group setting
99421- 99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	Service ineligible to be performed in a group setting
0362T	ABA - Behavior identification supporting assessment administered by physician or other QHP with the assistance of two or more technicians	Service ineligible to be performed in a group setting
0373T	ABA - Adaptive behavior treatment with protocol modification administered by physician or QHP with the assistance of two or more technicians	Service ineligible to be performed in a group setting
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)	HQ modifier is required when performed in a group setting
G0177	Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)	HQ modifier is required when performed in a group setting
G2012	Brief communication technology-based service, e.g., virtual check-in, by a physician or other qualified healthcare professional who can report on evaluation and management services.	Service ineligible to be performed in a group setting
G2025	Telehealth distant site service furnished by a Rural Health Clinic (RHC) or Federally Qualified Health Center (FQHC) only	Service ineligible to be performed in a group setting
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	HQ modifier is required when performed in a group setting

Code	Description	HQ Modifier Use
	services by a Medicare-enrolled opioid treatment program)	
G2068	weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy,	HQ modifier is required when performed in a group setting
G2069		
G2070	insertion); weekly bundle including dispensing and/or administration, substance use counseling, individual and	HQ modifier is required when performed in a group setting
G2071	removal); weekly bundle including dispensing and/or administration, substance use counseling, individual and	HQ modifier is required when performed in a group setting
G2072	dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology	HQ modifier is required when performed in a group setting
G2073		
G2074	including the drug, including substance use counseling, individual and group therapy, and toxicology testing if	HQ modifier is required when performed in a group setting
G2076	initial assessment by a program physician or a primary care physician, or an authorized health care professional	Service ineligible to be performed in a group setting

Service ineligible to be performed in a group setting G2078 Take home supply of methadone G2079 Take home supply of buprenorphine (oral) G2080 Each additional 30 minutes of counseling in a week of medication assisted treatment; list separately G2080 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 G2087 G2088 G2088 G2088 F2088	Code	Description	HQ Modifier Use
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IH0004 Rehavioral health counseling and therapy per 15 minutes			group setting
required when	H0004	Behavioral health counseling and therapy, per 15 minutes	HQ modifier is
			required when

Code	Description	HQ Modifier Use
		performed in a group setting
H0005	Alcohol and/or drug services; group counseling by a clinician	HQ not required, Group is in the description
H0006	Alcohol and/or drug services; Case Management	Service ineligible to be performed in a group setting
H0010	Alcohol/Drug services; sub-acute, medically monitored detoxification. (as an alternative to inpatient ASAM Level III.7-D)	Service ineligible to be performed in a group setting
H0011	Alcohol/Drug services; acute, medically monitored detoxification. (as an alternative to inpatient ASAM Level III.7-D)	Service ineligible to be performed in a group setting
H0012	Alcohol/Drug services; sub-acute, clinically managed detoxification. (outpatient ASAM Level III.2-D)	Service ineligible to be performed in a group setting
H0013	Alcohol/Drug services; acute (H0013), clinically managed detoxification. (outpatient ASAM Level III.2-D)	Service ineligible to be performed in a group setting
H0014	Ambulatory detoxification service for mild to moderate withdrawal from substance abuse (Ambulatory ASAM Level II-D).	Service ineligible to be performed in a group setting
H0015	Alcohol and/or drug services; Intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan).	Service ineligible to be performed in a group setting
H0016	Alcohol and/or drug services; Medical/somatic intervention in ambulatory setting	Service ineligible to be performed in a group setting
H0018	Alcohol and/or drug services, Behavioral health; short- term residential (non-hospital residential treatment program), without room and board, per diem	Service ineligible to be performed in a group setting
H0019	Alcohol and/or drug services, 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	Service ineligible to be performed in a group setting

Code	Description	HQ Modifier Use
H0020	Alcohol and/or drug services; Methadone administration and/or services (provision of the drug by licensed program)	Service ineligible to be performed in a group setting
H0022	Alcohol and/or drug intervention service (planned facilitation)	HQ modifier is required when performed in a group setting
H0023	Intensive In-Home Behavioral Health Treatment Services (IIBHT)	Service ineligible to be performed in a group setting
H0031	Mental health assessment, by non-physician.	Service ineligible to be performed in a group setting
H0032	Mental health service plan development by non-physician.	Service ineligible to be performed in a group setting
H0033	Oral Medication Administration, direct observation.	Service ineligible to be performed in a group setting
H0034	Medication training and support, per 15 minutes.	Service ineligible to be performed in a group setting
H0035	Partial Hospitalization	Service ineligible to be performed in a group setting
H0036	Community psychiatric supportive treatment, face-to-face, per 15 minutes.	HQ modifier is required when performed in a group setting
H0037	Community psychiatric supportive treatment program, per diem	Service ineligible to be performed in a group setting
H0038	Self-help/peer services	HQ modifier is required when performed in a group setting
H0039	Assertive community treatment, face-to-face, per 15 minutes.	Service ineligible to be performed in a group setting

Code	Description	HQ Modifier Use
		Service ineligible to
H0045	Respite care services, not in the home, per diem	be performed in a
		group setting
H0048	Alcohol and/or drug testing; Collection and handling only,	Service ineligible to
		be performed in a
	specimens other than blood	group setting
		HQ modifier is
H0050	Alcohol and/or drug services, brief intervention, per 15	required when
10030	minutes	performed in a group
		setting
		Service ineligible to
H2000	Child and Adolescent Needs Survey (CANS)	be performed in a
		group setting
		Service ineligible to
H2010	Comprehensive Medication Services	be performed in a
		group setting
		Service ineligible to
H2011	Crisis intervention service, per 15 minutes	be performed in a
		group setting
	Behavioral health day treatment, per hour	Service ineligible to
H2012		be performed in a
		group setting
		Service ineligible to
H2013	Psychiatric health facility service, per diem	be performed in a
		group setting
		HQ modifier is
H2014	Skills training and development, per 15 min	required when
12014	Skiiis training and development, per 15 min	performed in a group
		setting
		Service ineligible to
H2021	Community based wraparound services	be performed in a
		group setting
H2023 Si		HQ modifier is
	Supported employment	required when
		performed in a group
		setting
H2027	Psychoeducational Services	HQ modifier is
1202/	i sychoeddcallonal Services	required when

Code	Description	HQ Modifier Use
		performed in a group
		setting
⊔2022		HQ modifier is
	Activity therapy, per 15 min	required when
112032	Activity therapy, per 13 min	performed in a group
		setting
		Service ineligible to
Q3014	Telehealth originating site facility fee	be performed in a
		group setting
		HQ not required,
S9453	Smoking cessation classes, non-physician provider	Group is in the
		description
		Service ineligible to
S9480	Intensive Outpatient	be performed in a
		group setting
		Service ineligible to
T1005	Respite Care Services	be performed in a
		group setting
	Alcohol and/or substance abuse services; Family/couple counseling	Service ineligible to
T1006		be performed in a
	Counselling	group setting
	Alachal and/ar aubatanas abusa samilasa traatmant plan	Service ineligible to
T1007	Alcohol and/or substance abuse services, treatment plan development and/or modification	be performed in a
	development and/or modification	group setting
		Service ineligible to
T1016	Case Management	be performed in a
		group setting
	Screening to determine the appropriateness of	Service ineligible to
T1023	consideration of an individual for participation in a specified program, project or treatment protocol, per encounter	be performed in a
		group setting
		group setting
T1502	Administration of oral, intramuscular and/or subcutaneous medication by health care agency/professional	Service ineligible to
		be performed in a
	.,	group setting