Stop Costly Telehealth Mental Health Billing Errors and Payer Audits

Post-Test for American Academy of Professional Coders Continuing Education Units from Healthcare Training Leader Webinar

(Post-Test Expires on 7/31/2021)

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Instructions:

Enclosed is your post-test for the E/M Documentation Guidelines: Bust Overpayments With Clean Claims webinar. This program meets AAPC guidelines for 1.0 CEU. On Demand product requires successful completion of a Post-Test for continuing education units. Please provide your contact information, answer the questions, and then submit your post-test to Healthcare Training Leader® by:

> Mail: 2277 Trade Center Way, Suite 101, Naples, FL 34109, Fax: 800-767-9706, or Email: info@trainingleader.com

You must answer at least 70% of the questions correctly to receive your certificate of CEUs, which will be sent to you by email.

Contact Information:

Name:		
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Questions:

- 1. Mental health services can only be billed by providers credentialed with the specialty of psychology.
 - a. True
 - b. False
- 2. Which of the following E/M code categories would not typically be used by a mental health provider to receive reimbursement for services outside of psychotherapy?
 - a. Non face-to-face prolonged services
 - b. Preventative visits
 - c. Transitional care management
 - d. Telephone E/M services
- 3. Documentation of psychotherapy should include all of the following except:
 - a. Acknowledgement of face-to-face encounter
 - b. Interaction between the physician or other qualified healthcare provider and patient on issues related to mood, behavior, feelings, and thoughts, also referred to as talk therapy
 - c. Patient's progress towards goal
 - d. Documentation of some of the time spent as long as it supports greater than 50% of the time stated in the CPT code description
- 4. All of the following are true of psychotherapy codes, except:
 - a. They are time-based services.
 - b. There is a code option for interactive complexity that represents increased work that adds difficulty to delivery of service.
 - c. There are add-on codes for psychotherapy services.
 - d. There is only one set of codes used for psychotherapy, regardless of who is being treated during the session: family, group or individual.
- 5. Psychotherapy diagnostic evaluations:
 - a. Include collection information about the present and past behavior concerns and gathering of past, family medical and social history.
 - b. Can only be used for new patients that require an evaluation
 - c. Can be billed multiple times per day
 - d. Do not include psychotherapy services.

- 6. Which of the following scenarios would not be an indication to use psychotherapy for crisis?
 - a. Problems documented to be "life threatening".
 - b. Problems that require immediate attention to a patient in high distress.
 - c. A routine therapy session for an established patient that is improving.
 - d. A patient in a complex state requiring immediate attention to prevent harm to self or others.
- 7. Which of the following provider types are not recognized by CMS as providers who are eligible to furnish diagnostic and/or therapeutic treatment?
 - a. Clinical social workers (CSW)
 - b. Clinical nurse specialists (CNS)
 - c. Medical assistant (MOA)
 - d. Certified nurse-midwives (CNM)
- 8. Psychotherapy diagnostic evaluations:
 - a. Can only be used for new patients that require an evaluation
 - b. Can be billed multiple times per day
 - c. Do not include psychotherapy services.
 - d. Include collection information about the present and past behavior concerns and gathering of past, family medical and social history.
- 9. Which of the following scenarios would not be an indication to use psychotherapy for crisis?
 - a. Problems documented to be "life threatening".
 - b. Problems that require immediate attention to a patient in high distress.
 - c. A routine therapy session for an established patient that is improving.
 - d. A patient in a complex state requiring immediate attention to prevent harm to self or others.

- 10. What is the definition of a Qualified Healthcare Professional?
 - a. A physician or other qualified health care professional' is an individual who is qualified by education, training, licensure/regulation (when applicable) and facility privileging (when applicable) who performs a professional service within his/her scope of practice and independently reports that professional service.
 - b. An employee that has graduated from college with a masters or doctorate degree in a mental health related degree
 - c. A non-licensed employee that has completed extensive internal training related to the services they will be rendering
 - d. A non-licensed non-credentialed employee that has completed extensive internal training related to the services they will be rendering

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