

MSP Billing: Mental Health Codes

Quick Reference Guide

This short guide will provide you with key information on how to bill for MSP **fee-for-service** billing codes for mental health care.

Telehealth Individual Counselling

Six codes can be billed for telehealth counselling appointments. The fee codes are time-based, with a minimum time requirement of 20 minutes.

Fee Code	Fee Description	Value
13238	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 0-1)	\$82.84
13438	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 2-49)	\$77.24
13538	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 50-59)	\$82.84
13638	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 60-69)	\$86.57
13738	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 70-79)	\$97.52
13838	Telehealth FP Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes) (age 80+)	\$112.93

Billing Requirements

- MSP will pay for up to four (4) individual counselling visits (any combination of age appropriate in office, out of office and telehealth) per patient per year.
- Start and end time must be entered into both the billing claims and patient's chart.
- Documentation of the effect(s) of the condition on the patient and what advice or service was provided is required.

In-Office Individual Counselling

Six codes can be billed for in-office counselling. The fee codes are time-based, with a minimum time requirement of 20 minutes.



Fee Code	Fee Description	Value
12120	Individual counselling – in office (age 0-1)	\$82.84
00120	Individual counselling – in office (age 2-49)	\$77.24
15320	Individual counselling – in office (age 50-59)	\$82.84
16120	Individual counselling – in office (age 60-69)	\$86.57
17120	Individual counselling – in office (age 70-79)	\$97.52
18120	Individual counselling – in office (age 80+)	\$112.93

Billing Requirements

- MSP will pay for up to four (4) such visits per patient per year.
- Items 12120, 00120, 15320, 16120, 17120, and 18120 are subject to the daily volume payment rules.

Mental Health Planning Fee

The mental health planning fee is the completion and documentation of a care plan for patients with a confirmed eligible mental health diagnosis warranting the development of a care plan.

Fee Code	Fee Description	Value
14043	Mental Health Planning Fee	\$110.30

Eligibility Requirements

- Eligible patients must be living at home or in assisted living.
- Patients in Acute and Long-Term Care Facilities are not eligible.

Billing Requirements

- Payable to the family physician who is most responsible for the majority of the patient's longitudinal care and who has successfully submitted and met the requirements for PG14070 in the same calendar year.
- Payable once per calendar year per patient. Not intended as a routine annual fee.
- Chart documentation must include the care plan; total planning time (minimum 30 minutes); and physician face-to-face planning time (minimum 16 minutes)

Mental Health Management

Five mental health management fee codes are payable for prolonged counselling with patients. These fee codes are time-based, with a minimum time requirement of 20 minutes.

Fee Code	Fee Description	Value
14044	Mental Health Management Fee (age 2-49)	\$76.88
14045	Mental Health Management Fee (age 50-59)	\$82.49
14046	Mental Health Management Fee (age 60-69)	\$86.20
14047	Mental Health Management Fee (age 70-79)	\$97.13
14048	Mental Health Management Fee (age 80+)	\$112.44



Billing Requirements

- Payable a maximum of 4 times per calendar year per patient.
- Counselling may be provided in-person, by telephone or video conferencing.
- Applicable only once four previous MSP counselling fees—whether in-person or via telehealth—have been billed in the same calendar year.

Eligible Diagnoses and ICD-9 Codes for MSP billing

Category	Diagnosis	ICD-9
Anxiety Disorders	Anxiety Disorders	300, 308, 50B
Bipolar and Related Disorders	Bipolar	296
	Cyclothymia	301.13
Depressive Disorders	Depressive Disorders	311
Dissociative Disorders	Dissociative Disorders	300
Eating Disorders	Eating Disorders	307, 307.1
Gender Dysphoria	Gender Dysphoria	302
Impulse Control Disorders	Impulse Control Disorders	312
Neurocognitive Disorders	Delirium	293
	Dementia	290, 331, 331.0, 331.2
Neurodevelopmental Disorders	Attention Deficit Disorder	314
	Autism Spectrum Disorder	299.0
	Pervasive Development Disorder	299.0
Obsessive-Compulsive & Related Disorders	Obsessive-Compulsive Disorder	300
	Body Dysmorphic Disorder	300.7
Schizophrenia and other Psychotic Disorders	Schizophrenia and other Psychotic Disorders	293, 295, 297, 298
Sexual Dysfunction	Sexual Dysfunction	302
Sleep Disorders	Sleep Wake Disorders: Insomnia/Hypersomnolence, Narcolepsy	307.4, 347
	Parasomnias	307.4
	Breathing-Related Sleep Disorders	780.5
Somatic Symptom & Related Disorders	Factitious Disorder	300, 312
	Pain Disorder with Affective Symptoms	338
	Somatic Symptom Disorder	300.8
	Conversion Disorder	300.1
Substance Use Disorders	Substance Use Disorder: Alcohol	303
	Substance Use Disorders: Drugs	304
Trauma and stressor related Disorders	Adjustment Disorders	309
	Post-Traumatic Stress Disorder	309