

**Committee on Health Care
of
the Oregon Legislative Assembly**

**Mental Health
Provider Reimbursement
Carrier Data Call**

As required by 2017 Senate Bill 860

**Volume IV – Time-Based Procedure Code
Maximum Allowable Reimbursement Rate
Analysis**

Prepared for:

**Oregon Department of Consumer and
Business Services
Division of Financial Regulation**

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Table of Contents

C. DATA CALL ANALYSIS AND OBSERVATIONS – TIME-BASED PROCEDURE CODE MARR ANALYSIS	3
REPORT CHART C1: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – NEW PATIENT E&M, 2015 THROUGH 2018	4
REPORT CHART C2: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – ESTABLISHED PATIENT E&M, 2015 THROUGH 2018	5
REPORT CHART C3: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – PSYCHOTHERAPY, 2015 THROUGH 2018	6
REPORT CHART C4: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – PSYCHOTHERAPY WITH E&M, 2015 THROUGH 2018	7
REPORT CHART C5: SUMMARY ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF AN OFFICE VISIT – BY PROCEDURE CODE GROUPS, 2015 THROUGH 2018	8
REPORT CHART C6: CARRIER AND PLAN TREND ANALYSES OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF AN OFFICE VISIT – BY PROCEDURE CODE GROUP, 2015 THROUGH 2018	28

C. Data Call Analysis and Observations – Time-Based Procedure Code MARR Analysis

This section addresses whether during the Period of Review, the Carriers had an equivalent Maximum Allowable Reimbursement Rate (MARR) for time-based procedure codes for both in-network Behavioral Mental Health Providers¹ and in-network Medical Providers, including the reimbursement of incremental increases in the length of an office visit by provider type, as it relates to SB 860, Section 1, Subsection (2)(c).

For this analysis, the following 16 procedure codes were grouped by homogenous procedure codes and the associated incremental length of the visit. Since the focus of this section is on the reimbursement of incremental increases in the length of an office visit, 16 of the 35 procedure codes were selected for analysis. Each of the 16 procedure codes within the selected procedure code groupings has an associated duration or length of time (in minutes) that starts with the lowest duration amount and sequentially gets higher. The procedure code groups are as follows: 1) New Patient Evaluation and Management (E&M) codes 99201 through 99205; 2) Established Patient E&M codes 99211 through 99215; 3) Psychotherapy codes 90832, 90834 and 90837; and 4) Psychotherapy with E&M codes 90833, 90836 and 90838.

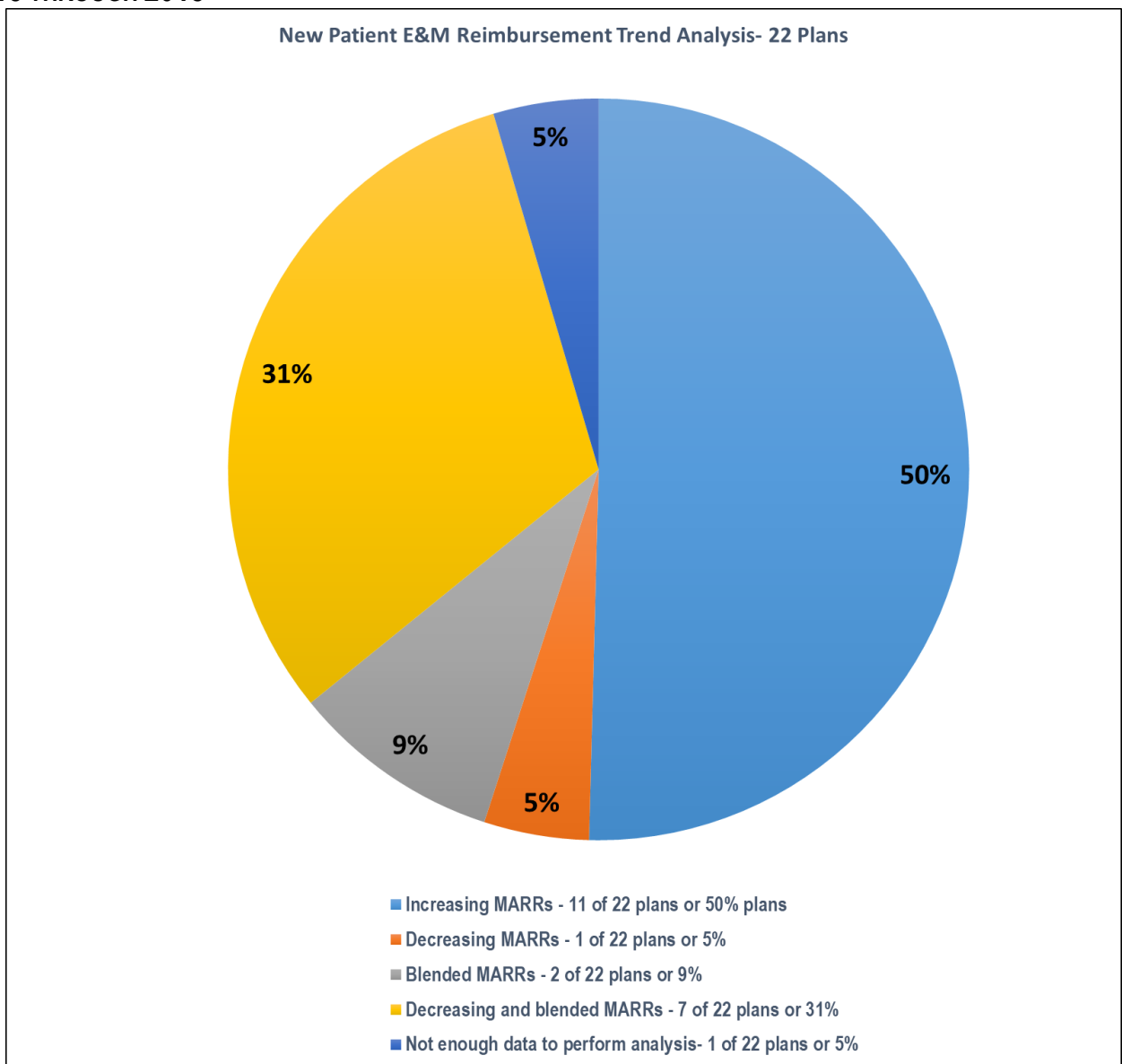
As discussed in Report Chart C5 below, the MARRs and percentage of increases in the duration of the outpatient time-based office visits sometimes varied between Medical Providers, BH Providers and MH Providers depending on the carrier and plan. Not all carriers and plans reported MARRs for all provider types. Specific to the analyses in Report Chart C5, some of the Carriers and Plans did not provide a MARR for non-prescribing provider types for evaluation and management office visits, consistent with the AMA coding guidelines for E&M services. For the Carriers that follow AMA guidance, BH Providers did not have a reported MARR. Report Chart C5 will provide additional details on which Carriers and Plans did not provide MARRs for specific provider types for the noted procedure code groupings.

For purposes of the Contractor's reporting of the analysis in the Report, the Contractor has included two terms to best reflect situations identified in the analysis. Specifically, the Report describes instances of a "decreasing" MARR and "blended" MARR. Decreasing MARR occurs when a lower incremental MARR for longer patient treatment times based on the procedure code grouping. For example, with a decreasing MARR, the provider may have a higher MARR for a 45 minute visit compared to the MARR for a 60 minute visit. A blended MARR is explained as equivalent reimbursement levels for two different procedure codes within the same procedure grouping but with different durations of time, e.g., a provider who spent 25 minutes with a patient would have the same rate if the provider spent 40 minutes with the patient. Not all Carriers and Plans used decreasing or blended MARRs during the Period of Review. Following the summary analysis in Report Chart 5, Report Chart C6 includes the Contractor's analysis by Carrier and Plan. Additionally, Report Charts 1-4 below include high level summary charts demonstrating the percentages of plans that fall within each trend.

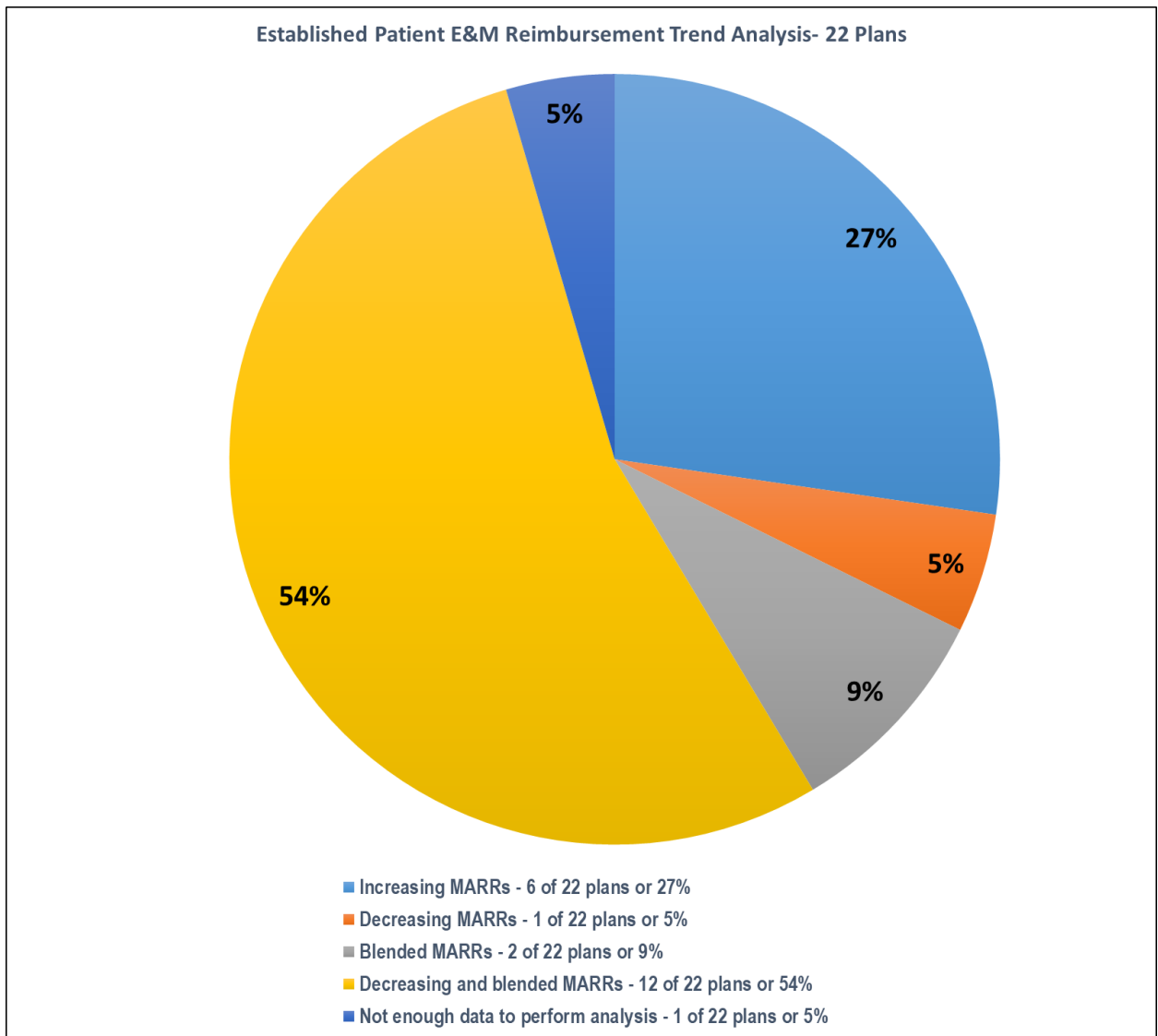
The results of the trend analyses for the 22 plans and 11 carriers are as follows:

¹ While part (c) mentions "behavioral mental health providers" and part (d) references "behavioral health providers" the term "behavioral health" refers to both mental Health and substance use disorder treatment, so the two provider descriptions are equivalent in their meaning.

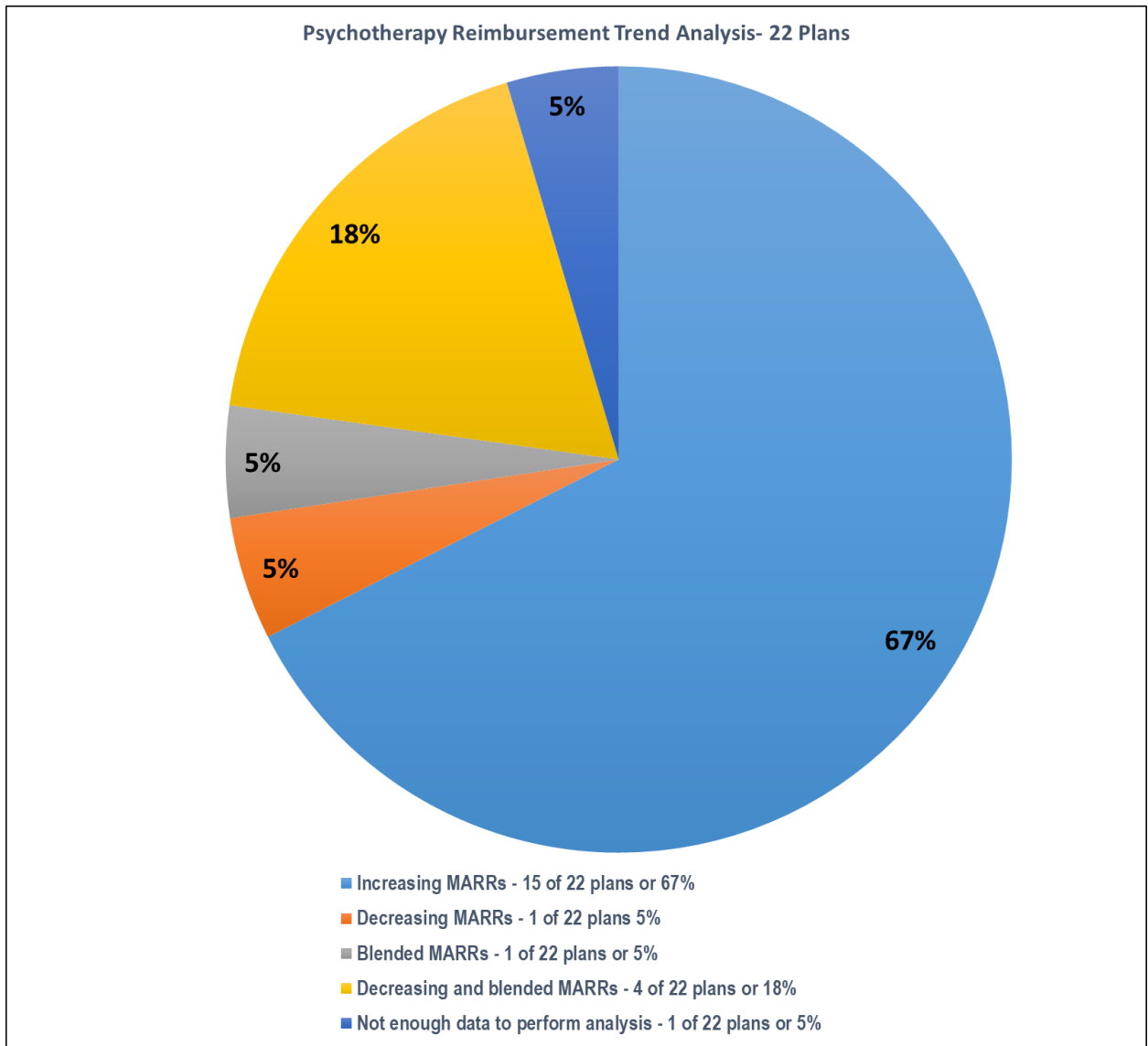
REPORT CHART C1: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – NEW PATIENT E&M, 2015 THROUGH 2018



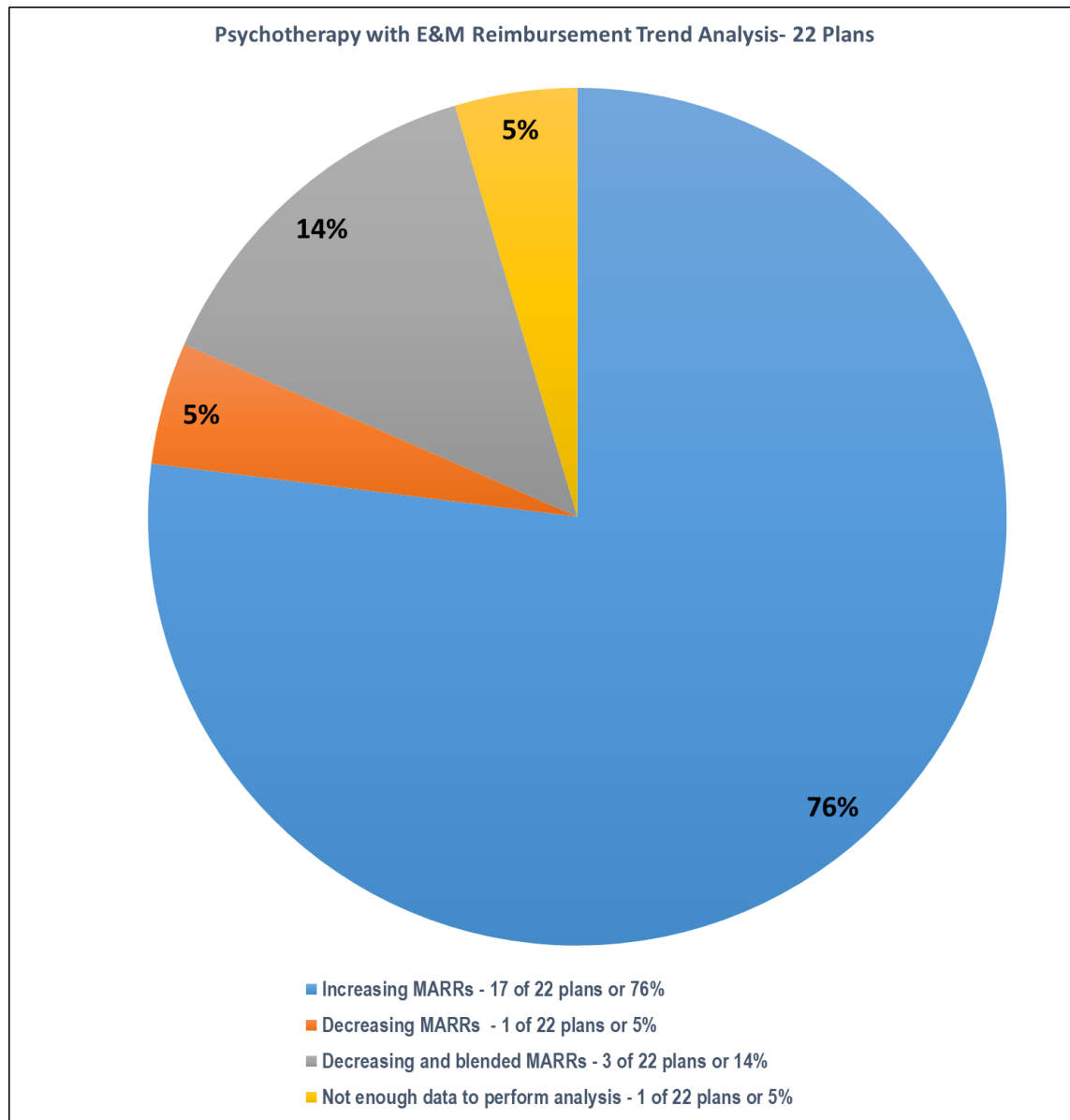
REPORT CHART C2: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – ESTABLISHED PATIENT E&M, 2015 THROUGH 2018



REPORT CHART C3: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – PSYCHOTHERAPY, 2015 THROUGH 2018



REPORT CHART C4: TREND ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF OFFICE VISIT – PSYCHOTHERAPY WITH E&M, 2015 THROUGH 2018



REPORT CHART C5: SUMMARY ANALYSIS OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF AN OFFICE VISIT – BY PROCEDURE CODE GROUPS, 2015 THROUGH 2018

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	<u>SUMMARY ANALYSIS:</u> From 2015 to 2018, 11 of 22 plans had increasing MARRs as the duration of the office visit increased for the entire Period of Review - One of 11 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers), which ranged from 24.6% to 71.9% - Two of 11 plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only, which ranged from 24.6% to 71.9% - One of 11 plans (<i>carrier 8 - plan S</i>) had percentages of increase within 10 percent of all other reported provider types, which ranged from 23.8 % to 77.1% - Seven of 11 plans (<i>carrier 2 - plans E, G and H, carrier 5 - plans M and N, carrier 6 - plan P and carrier 11 - plan V</i>) had percentages of increase that varied by more than 10 percent, which ranged from 3.9% to 122.1% <u>During 2015-</u> - One of 22 plans (<i>carrier 5 - plan L</i>) was not marketed in 2015 for this procedure code group - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis 14 of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H, and I, carrier 3 - plan J, carrier 5 - plans N and O, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>) did not provide MARRs for some or all BH Providers in this year for this procedure code group 15 of 22 plans (<i>carrier 1 - plans A and C, carrier 2 - plans E, F, G, H, I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M and N, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>)
	99202	20	
	99203	30	
	99204	45	
	99205	60	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			had increasing MARRs as the duration of the office visit increased - One of these 15 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of these 15 plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only - Three of 22 plans (<i>carrier 2 - plan D, carrier 5 - plan O and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99204 to 99205) - Two of three plans (<i>carrier 2 - plan D and carrier 9 - plan T</i>) applied a decreasing MARR to Medical Providers only, MDs and DOs for plan D, and just DOs for plan T, with a decrease ranging from 3.6% to 4.3% - One of three plans (<i>carrier 5 - plan O</i>) applied a decreasing MARR to PMHNPs only with a decrease of 7.5% - Two of 22 plans (<i>carrier 7 - plans Q and R</i>) used a blended MARR as the length of the office visit increased (from procedure code 99202 to 99203 and from 99203 to 99204) - Two of two plans (<i>carrier 7 - plans Q and R</i>) applied a blended MARR to LCSWs and LPC/LMFTs - One of two plans (<i>carrier 7 - plan R</i>) applied a blended MARR for NPs <u>During 2016-</u> - One of 22 plans (<i>carrier 5 - plan L</i>) was not market in 2016 for this procedure code group - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis 14 of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H, and I, carrier 3 - plan J, carrier 5 - plans N and O, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>) did not provide

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			MARRs for BH Providers in this year for this procedure code group 15 of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, and H, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M, N and O, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - One of 15 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of 15 plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only - Three of 22 plans (<i>carrier 1 - plan A, carrier 2 - plan I and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99203 to 99204 and/or 99204 to 99205) - One of three plans (<i>carrier 2 - plan I</i>) applied a decreasing MARR to Medical Providers only with a decrease of 16.6% from procedure code 99203 to 99204 - One of three plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to MDs with a decrease of 10.7% and NPs with a decrease of 20.5% from procedure code 99204 to 99205 - One of three plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to DOs with a decrease of 31.4% and NPs with a decrease of 31.4% from procedure code 99204 to 99205 - Two of 22 plans (<i>carrier 7 - plans Q and R</i>) used a blended MARR as the length of the office visit increased (from procedure code 99203 to 99204) to LCSWs and LPC/LMFTs <u>During 2017-</u>

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- One of 22 plans (<i>carrier 5 - plan O</i>) did not provide MARRs for this procedure code group for any other providers except Medical Providers and NPs - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis 15 of 22 plans (<i>carrier 1 - plan A, carrier 2 - plans D, E, F, G, H, and I, carrier 3 - plan J, carrier 5 - plans L, M, N and O, carrier 6 - plan P, carrier 10 - plan U and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group 14 of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans E, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M, N and O, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - One of 14 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH, Medical, and MH Providers) - Two of 14 plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH and Medical Providers only - Four of 22 plans (<i>carrier 1 - plan A, carrier 2 - plan D, carrier 5 - plan L and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99202 to 99203, 99203 to 99204, and 99204 to 99205) - Two of four plans (<i>carrier 2 - plan D and carrier 9 - plan T</i>) applied a decreasing MARR to Medical Providers only with decreases ranging from 4.8% to 26.6% - One of four plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to DOs with a decrease of 10.7%, MDs with a decrease of 4.9% and NPs with a decrease of 20.5% - One of four plans (<i>carrier 5 - plan L</i>) applied a decreasing MARR to NPs only with a decrease of 0.3%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- Two of 22 plans (<i>carrier 7 - plans Q and R</i>) used a blended MARR as the length of the office visit increased (from procedure code 99203 to 99204) to LCSWs and LPC/LMFTs - Two of 22 plans (<i>carrier 2 - plan F and carrier 5 - plan L</i>) had less than one percent difference between two rates as the length of the office visit increased (from procedure code 99204 to 99205) - One of two plans (<i>carrier 2 - plan F</i>) had a difference of 0.8% between two procedure codes for Medical Providers - One of two plans (<i>carrier 5 - plan L</i>) had a difference of 0.3% between the two procedure codes for NPs <u>During 2018-</u> - One of 22 plans (<i>carrier 5 - plan O</i>) did not market this plan in 2018 - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide MARR for any provider type 15 of 22 plans (<i>carrier 1 - plans A and C, carrier 2 - plans D, E, F, G, H, and I, carrier 3 - plan J, carrier 5 - plans L, M and N, carrier 6 - plan P, carrier 10 - plan U and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group 15 of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L, M, and N, carrier 6 - plan P, carrier 8 - plan S, carrier 10 - plan U and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - One of 15 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of 15 plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- Three of 22 plans (<i>carrier 1 - plans A and C and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99203 to 99204, and 99204 to 99205) - Two of four plans (<i>carrier 2 - plan D and carrier 9 - plan T</i>) applied this decreasing MARR to Medical Providers only with decreases ranging from 4.8% to 26.6% - One of three plans (<i>carrier 1 - plan A</i>) applied this decreasing MARR to DOs with a decrease of 4%, MDs with a decrease of 1.7%, NPs with a decrease of 0.6% and Psychiatrists with a decrease of 16.2% - One of three plans (<i>carrier 1 - plan C</i>) applied this decreasing MARR to NPs only with a decrease of 6.4% - One of three plans (<i>carrier 9 - plan T</i>) applied this decreasing MARR to DOs with a decrease of 8.6% and NPs with a decrease of 25.5% - Two of 22 plans (<i>carrier 7 - plans Q and R</i>) used a blended MARR as the length of the office visit increased (from procedure code 99203 to 99204) to LCSWs and LPC/LMFTs - One of 22 plans (<i>carrier 1 - plan A</i>) was less than one percent difference for NPs between two rates as the length of the office visit increased (from procedure code 99204 to 99205)
Established Patient E&M	99211	5	<u>SUMMARY ANALYSIS:</u> From 2015 to 2018, six of 22 plans had increasing MARRs as the duration of the office visit increased for the entire Period of Review - One of six plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers), which ranged from 33.9% to 119.6% - Two of six plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only, which ranged from 33.8% to 119.6% - Three of six plans (<i>carrier 5 - plans N and O, carrier 8 - plan S</i>) had percentages of increase that varied by
	99212	10	
	99213	15	
	99214	25	
	99215	40	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			more than 10 percent, which ranged from 3.3% to 226.1% <u>During 2015-</u> - One of 22 plans (<i>carrier 5 - plan L</i>) did not market this plan in 2015 - One of 22 plans (<i>carrier 1, plan B</i>) did not provide enough information to perform an analysis 11 of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plan N, carrier 6 - plan P, carrier 10 - plan U and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group - Seven of 22 plans (<i>carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M, N and O, carrier 8 - plan S and carrier 10 - plan U</i>) had increasing MARRs as the duration of the office visit increased - One of seven plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of seven plans (<i>carrier 3 - plan J and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only - Eight of 22 plans (<i>carrier 1 - plans A and C, carrier 2 - plans D, F, G, H and I and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99211 to 99212 and/or 99214 to 99215) - Five of eight plans (<i>carrier 2 - plans D, F, G, H and I</i>) applied a decreasing MARR to Medical Providers only with a decrease ranging from 3.8% to 32.8% - One of eight plans (<i>carrier 1 - plan C</i>) applied a decreasing MARR to NPs only with a decrease of 14.7% - One of eight plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 41.9%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			○ One of eight plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to DOs with a decrease of 1.7%, NPs with a decrease of 3.5%, and Psychiatrists with a decrease of 26.7% • Ten of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 6 - plan P, carrier 7 - plans Q and R, and carrier 11 - plan V</i>) used a blended MARR as the length of the office visit increased (from procedure code 99211 to 99212, 99212 to 99213, and/or 99213 to 99214) ○ Eight of 10 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 6 - plan P, and carrier 11 - plan V</i>) applied a blended MARR for all BH Providers only ○ Two of 10 plans (<i>carrier 7 - plans Q and R</i>) applied a blended MARR for all BH Providers and all MH Providers but not for Medical Providers <u>During 2016-</u> • One of 22 plans (<i>carrier 5 - plan L</i>) did not market the plan in 2016 for this procedure code group • One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis • 12 of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plan N, carrier 6 - plan P, carrier 10 - plan U, and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group • Eight of 22 plans (<i>carrier 1 - plan C, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M, N, and O, carrier 8 - plan S, and carrier 10 - plan U</i>) had increasing MARRs as the duration of the office visit increased ○ One of eight plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) ○ Two of eight plans (<i>carrier 3 - plan J, and carrier 10 - plan U</i>) had the same percentages of

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			increase for MH Providers and Medical Providers only • Six of 22 plans (<i>carrier 1 - plan A, carrier 2 - plans D, G, H and I, carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99211 to 99212 and/or 99214 to 99215) ○ Four of six plans (<i>carrier 2 - plans D, G, H and I</i>) applied a decreasing MARR to all Medical Providers only with a decrease ranging from 3.7% to 61.2% ○ One of six plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to MDs only with a decrease of 13.4% ○ One of six plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to DOs with a decrease of 0.2% (<i>nearly blended</i>), LCSWs with a decrease of 2.9%, and LPC/LMFTs with a decrease of 2.9% • Ten of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 6 - plan P, carrier 7 - plans Q and R, and carrier 11 - plan V</i>) used a blended MARR as the length of the office visit increased (from procedure code 99211 to 99212, 99212 to 99213, and/or 99213 to 99214) ○ Eight of 10 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 6 - plan P, carrier 11 - plan V</i>) applied a blended MARR for Psychiatrists only ○ Two of 10 plans (<i>carrier 7 - plans Q and R</i>) applied a blended MARR for all BH Providers and all MH Providers but not for Medical Providers • One of 22 plans (<i>carrier 9 - plan T</i>) had an equivalent MARR (less than one percent difference between two rates) as the length of the office visit increased (from procedure code 99214 to 99215) ○ One of one plans (<i>carrier 9 - plan T</i>) had an equivalent MARR for DOs only with a difference of 0.2% between two procedure codes

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			<u>During 2017-</u> - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis - Twelve of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plan L, carrier 6 - plan P, carrier 10 - plan U, and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group - Fourteen of 22 plans (<i>carrier 2 - plans D, E, F, G and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans N and O, carrier 6 - plan P, carrier 8 - plan S, carrier 9 - plan T, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - One of 14 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of 14 plans (<i>carrier 3 - plan J, and carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only - Five of 22 plans (<i>carrier 1 - plans A and C, carrier 2 - plan H, and carrier 5 - plan L and M</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99211 to 99212 and/or 99214 to 99215) - One of five plans (<i>carrier 2 - plan H</i>) applied this decreasing MARR to all Medical Providers only with a decrease ranging from 9.5% to 32.5% - One of five plans (<i>carrier 5 - plan M</i>) applied a decreasing MARR to MDs only with two decreases ranging from 1.5% to 2.9% - One of five plans (<i>carrier 5 - plan L</i>) applied a decreasing MARR to NPs only with a decrease of 2.5% - Two of five plans (<i>carrier 1 - plans A and B</i>) applied a decreasing MARR to PMHNPs only with a decrease ranging from 11.8% to 23.9%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- Two of 22 plans (<i>carrier 7 - plans Q and R</i>) used a blended MARR as the length of the office visit increased (from procedure code 99212 to 99213 and/or 99213 to 99214) for all BH Providers and all MH Providers but not for Medical Providers <u>During 2018-</u> - One of 22 plans (<i>carrier 5 - plan O</i>) did not market this plan in 2018 for this procedure code group - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide MARR in 2018 for this procedure code - Twelve of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plans L and N, carrier 6 - plan P, carrier 10 - plan U, and carrier 11 - plan V</i>) did not provide MARRs for BH Providers in this year for this procedure code group - Thirteen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plan N, carrier 6 - plan P, carrier 8 - plan S, carrier 9 - plan T, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - One of 13 plans (<i>carrier 4 - plan K</i>) had the same percentages of increase for all provider types (BH Providers, Medical Providers, and MH Providers) - Two of 13 plans (<i>carrier 3 - plan J, carrier 10 - plan U</i>) had the same percentages of increase for MH Providers and Medical Providers only - Five of 22 plans (<i>carrier 1 - plans A and C, carrier 5 - plans L and M, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 99211 to 99212, 99213 to 99214, and/or 99214 to 99215) - Two of five plans (<i>carrier 5 - plans L and M</i>) applied this decreasing MARR to MDs only with a decrease ranging from 21.1% to 40.2% - One of five plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to DOs only with a decrease of 29.6%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			○ One of five plans (<i>carrier 1 - plan C</i>) applied a decreasing MARR to PMHNPs only with a decrease of 32.7% ○ One of five plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 19.7% • Three of 22 plans (<i>carrier 7 - plans Q and R, and carrier 9 - plan T</i>) used a blended MARR as the length of the office visit increased (from procedure code 99212 to 99213, 99213 to 99214, and/or 99214 to 99215) ○ Two of two plans (<i>carrier 7 - plans Q and R</i>) applied a blended MARR for all BH Providers and all MH Providers but not for Medical Providers ○ One of two plans (<i>carrier 9 - plan T</i>) applied a blended MARR for LCSWs and LPC/LMFTs
Psychotherapy	90832	30	<u>SUMMARY ANALYSIS:</u> From 2015 to 2018, 15 of 22 had increasing MARRs as the duration of the office visit increased for the entire Period of Review From 2015 to 2018, one of 22 plans had decreasing MARRs as the duration of the office visit increased for the entire Period of Review for some of the BH Providers, MH Providers and Medical Providers From 2015 to 2018, one of 22 plans had decreasing and blended MARRs as the duration of the office visit increased for the entire Period of Review; the decreasing rates only affect BH Providers in 2016 to 2018 (Psychologists in 2015, LCSWs and LPC/LMFTs in 2016, and LCSWs in 2017 and 2018). In 2015, BH Providers, MH Providers and Medical Providers, specifically Psychologists, MDs and Psychiatrists, had decreasing rates and MH Providers, specifically PMHNPs, had blended MARRs From 2015 to 2018, three of 22 plans had increasing MARRs as the duration of the office visit increased for some years but also had decreasing and/or blended MARRs as the duration of the office visit increased for
	90834	45	
	90837	60	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			some years; provider types that had decreasing or blended MARRs included LCSWs, Psychiatrists and PMHNPs From 2015 to 2018, one of 22 plans had increasing MARRs as the duration of the office visit increased for some years but also had equivalent MARRs as the duration of the office visit increased for one year; the only provider types that had equivalent MARRs as the duration of the office visit increased were LPC/LMFTs From 2015 to 2018, one of 22 plans did not provide enough information to perform an analysis <u>During 2015-</u> • One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis • One of 22 plans (<i>carrier 5 - plan L</i>) did not market this plan in 2015 • Ten of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plans N and O, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group • Eighteen of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M, N and O, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased • Two of 22 plans (<i>carrier 1 - plan A, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90834 to 90837) ○ One of two plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to MDs only with a decrease of 3.9% ○ One of two plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to Psychologists with a

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			decrease of 4.2%, to MDs with a decrease of 49.4% and Psychiatrists with a decrease of 25.9% - One of 22 plans (<i>carrier 9 - plan T</i>) used a blended MARR as the length of the office visit increased (from procedure code 90834 to 90837); the carrier applied this same MARR for PMHNPs only <u>During 2016-</u> - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis - One of 22 plans (<i>carrier 5 - plan L</i>) did not market this plan in 2016 for this procedure code group - Nine of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5 - plan O, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group - Fifteen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans N and O, carrier 6 - plan P, carrier 7 - plans Q, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - Five of 22 plans (<i>carrier 1 - plans A and C, carrier 5 - plan M, carrier 7 - plan R, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90832 to 90834 and/or 90834 to 90837) - Two of five plans (<i>carrier 1 - plans A and C</i>) applied a decreasing MARR to PMHNPs only with a decrease ranging from 10.1% to 16.7% - One of five plans (<i>carrier 7 - plan R</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 83.3% - One of five plans (<i>carrier 5 - plans M</i>) applied a decreasing MARR to LCSWs only with a decrease of 17.3%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			○ One of five plans (<i>carrier 9 - plans T</i>) applied a decreasing MARR to LCSWs with a decrease of 59.5% and LPC/LMFTs with a decrease of 19% <u>During 2017-</u> • One of 22 plans (<i>carrier 1 - plan B</i>) did not provide enough information to perform an analysis • One of 22 plans (<i>carrier 5 - plan O</i>) did not market this plan for this procedure code group • Nine of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 5 - plan L, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group • Nineteen of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L, M, N and O, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased • Two of 22 plans (<i>carrier 1 - plan A, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90834 to 90837) ○ One of two plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 13.5% ○ One of two plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to LCSWs only with a decrease of 31.9% <u>During 2018-</u> • One of 22 plans (<i>carrier 1. plan B</i>) did not provide enough information to perform an analysis • One of 22 plans (<i>carrier 5 - plan O</i>) did not market this plan in 2018 for this procedure code group • Nine of 22 plans (<i>carrier 1 - plan C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 5. plan O, and carrier 8 - plan S</i>) did not provide MARRs for

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			Medical Providers in this year for this procedure code group - Sixteen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans M and N, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - Two of 22 plans (<i>carrier 1 - plan A, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90832 to 90834 and/or 90834 to 90837) - One of two plans (<i>carrier 9 - plans T</i>) applied a decreasing MARR to LCSWs only with a decrease of 31.9% - One of two plans (<i>carrier 1 - plans A</i>) applied a decreasing MARR to MDs with a decrease of 21.7% and LPC/LMFTs with a decrease of 18% - Two of 22 plans (<i>carrier 1 - plan C, and carrier 5 - plan L</i>) had an equivalent MARR (less than one percent difference between two rates) as the length of the office visit increased (from procedure code 90834 to 90837) - One of two plans (<i>carrier 1 - plan C</i>) had an equivalent MARR for PMHNPs only with a difference of 0.1% between two procedure codes - One of two plans (<i>carrier 5 - plan L</i>) had an equivalent MARR for LPC/LMFTs with a difference of 0.5% between the two procedure codes
Psychotherapy with E&M	90833	30	<u>SUMMARY ANALYSIS:</u> From 2015 to 2018, 17 of 22 plans had increasing MARRs as the duration of the office visit increased for the entire Period of Review From 2015 to 2018, one of 22 plans had decreasing MARRs as the duration of the office visit increased for
	90836	45	
	90838	60	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			the entire Period of Review for BH Providers, MH Providers and Medical Providers From 2015 to 2018, one of 22 plans had decreasing and blended MARRs as the duration of the office visit increased for the entire Period of Review for BH Providers, MH Providers and Medical Providers From 2015 to 2018, two of 22 plans had increasing MARRs as the duration of the office visit increased for some years but also had decreasing and/or blended MARRs as the duration of the office visit increased for some years; provider types that had decreasing or blended MARRs included Psychiatrists and PMHNPs From 2015 to 2018, one of 22 plans did not provide a MARR for this procedure code group <u>During 2015-</u> • Seven of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group • Four of 22 plans (<i>carrier 1 - plan A, and carrier 5 - plans L, N and O</i>) did not provide MARRs for BH Providers in this year for this procedure code group • Twenty of 22 plans (<i>carrier 1 - plans A and C, carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L, M, N and O, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased • One of 22 plans (<i>carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90836 to 90838); this carrier applied a decreasing MARR for Psychologists with a decrease of 40%, MDs with a decrease of 40.3% and Psychiatrists with a decrease of 40.3%

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- One of 22 plans (<i>carrier 9 - plan T</i>) used a blended MARR as the length of the office visit increased (from procedure code 90836 to 90838); the carrier applied a blended MARR for LCSWs, LPC/LMFTs, NPs, and PMHNPs <u>During 2016-</u> - One of 22 plans (<i>carrier 1 - plan B</i>) did not provide a MARR for this procedure code group - Eight of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 5 - plan O, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group - Three of 22 plans (<i>carrier 5 - plans L, N and O</i>) did not provide MARRs for BH Providers in this year for this procedure code group - Eighteen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L, M, N and O, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - Three of 22 plans (<i>carrier 1 - plans A and C, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90836 to 90838) - One of three plans (<i>carrier 9 - plans T</i>) applied a decreasing MARR to Psychologists only with a decrease of 25.1% - One of three plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to PMHNPs only with a decrease of 30.8% - One of three plans (<i>carrier 1 - plan C</i>) applied a decreasing MARR to Psychiatrists with a decrease of 17.2% and PMHNPs with a decrease of 9.5% - One of 22 plans (<i>carrier 9 - plan T</i>) had an equivalent MARR (less than one percent difference between two rates) as the length of the office visit increased

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			(from procedure code 90836 to 90838) for Psychiatrists only with a difference of 0.1% between two procedure codes <u>During 2017-</u> • One of 22 plans (<i>carrier 1 - plan B</i>) did not provide a MARR for this procedure code group • One of 22 plans (<i>carrier 5 - plan O</i>) was not marketed in 2017 for this procedure code group • Seven of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group • Three of 22 plans (<i>carrier 1 - plan C, and carrier 5 - plans L and N</i>) did not provide MARRs for BH Providers in this year for this procedure code group • Seventeen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L, M and N, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased • Three of 22 plans (<i>carrier 1 - plans A and C, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90833 to 90836 and/or 90836 to 90838) ○ One of three plans (<i>carrier 9 - plans T</i>) applied a decreasing MARR to Psychologists with a decrease of 31% and MDs with a decrease of 22.8% ○ One of three plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 26.4% ○ One of three plans (<i>carrier 1 - plan C</i>) applied a decreasing MARR to Psychiatrists with decreases ranging from 16.9% to 21.9% and PMHNPs with a decrease of 9.1% <u>During 2018-</u>

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			- One of 22 plans (<i>carrier 1 - plan B</i>) did not provide a MARR for this procedure code group - One of 22 plans (<i>carrier 5 - plan O</i>) did not provide a MARR for this procedure code group - Seven of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, and carrier 8 - plan S</i>) did not provide MARRs for Medical Providers in this year for this procedure code group - Two of 22 plans (<i>carrier 1 - plan C, and carrier 5 - plan L</i>) did not provide MARRs for BH Providers in this year for this procedure code group - Sixteen of 22 plans (<i>carrier 2 - plans D, E, F, G, H and I, carrier 3 - plan J, carrier 4 - plan K, carrier 5 - plans L and M, carrier 6 - plan P, carrier 7 - plans Q and R, carrier 8 - plan S, carrier 10 - plan U, and carrier 11 - plan V</i>) had increasing MARRs as the duration of the office visit increased - Three of 22 plans (<i>carrier 1 - plans A and C, and carrier 9 - plan T</i>) used a decreasing MARR as the length of the office visit increased (from procedure code 90836 to 90838) - One of three plans (<i>carrier 9 - plan T</i>) applied a decreasing MARR to Psychologists with a decrease of 31% and MDs with a decrease of 22.8% - One of three plans (<i>carrier 1 - plan A</i>) applied a decreasing MARR to Psychiatrists only with a decrease of 42% - One of three plans (<i>carrier 1 - plan C</i>) applied a decreasing MARR to PMHNPs only with a decrease of 5.8% - One of 22 plans (<i>carrier 5 - plan N</i>) had an equivalent MARR (less than one percent difference between two rates) as the length of the office visit increased (from procedure code 90833 to 90836) for Psychiatrists only with a difference of 0.6% between two procedure codes

REPORT CHART C6: CARRIER AND PLAN TREND ANALYSES OF REIMBURSEMENT FOR TIME-BASED PROCEDURE CODES, INCLUDING INCREMENTAL INCREASES IN LENGTH OF AN OFFICE VISIT – BY PROCEDURE CODE GROUP, 2015 THROUGH 2018

Carrier 1, Plan A

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	The carrier did not report a MARR for BH Providers during the Period of Review for this grouping of procedure codes except for Psychologists during 2015 and 2016. The carrier only reported MARRs for Medical Providers and MH Providers with prescribing privileges during 2017 and 2018. During the Period of Review, for most procedure codes, the MH Providers with prescribing privileges had a lower MARR than Medical Providers. Also, the Psychologists had a lower MARR than both Medical Providers and MH Providers with prescribing privileges. As the office visit time length increased, the MARR also increased for Medical Providers and MH Providers with prescribing privileges in most cases. The percentage of increase for Medical Providers was comparable to the increases for MH Providers with prescribing privileges in most instances. During 2016 and 2017, in reference to the NPs, the MARR decreased as the session time increased from 45 to 60 minutes. The MARR for 60 minutes (procedure code 99205) decreased by 20.5% during 2016 and by 5.6% in 2017. In 2016, the MDs' rate decreased by 10.7% for 99205, and in 2017, the MDs' rate decreased by 4.9% for 99204. During 2018, in reference to the Psychiatrists, the MARR decreased as the session time increased from 45 to 60 minutes. The MARR for 60 minutes (procedure code 99205) decreased by 16.2%. In 2018, the rate decreased by 1.7% for MDs for 99204, and the rate decreased by 4% for DOs for 99205.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	The carrier did not report a MARRs for BH Providers in 2015 and only reported a MARRs for Medical Providers and MH Providers with prescribing privileges. The carrier did report MARRs in 2016, 2017 and 2018 for Psychologists and LCSWs. During the Period of Review, in most situations, Medical Providers had higher MARR than MH Providers with prescribing privileges. Also, during the Period of Review, the LCSWs and Psychologists had a lower MARR than Medical Providers
	99212	10	
	99213	15	
	99214	25	
	99215	40	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			and MH Providers with prescribing privileges. As the office visit time length increased, the MARR also increased for Medical Providers and MH Providers with prescribing privileges in most cases. In a few instances, the percentage of increase for MH Providers with prescribing privileges was lower than the increases for Medical Providers. In reference to MH Providers with prescribing privileges there were a few instances where the MARR decreased as the session time increased from 25 to 40 minutes (procedure code 99215). In particular, during 2015, the MARR for NPs and Psychiatrists decreased by 3.5% and 26.7% respectively. In 2016, MDs had decreasing rates for 99215, which was 13.4%. Also, during 2017, the MARRs for PMHNPs decreased by 11.8%.
Psychotherapy	90832	30	The carrier reported MARRs for BH Providers, Medical Providers and MH Providers with prescribing privileges. During the Period of Review, BH Providers had a MARR that was equal to or greater than the MARRs for both Medical Providers and MH Providers with prescribing privileges. Also, in most instances, MH Providers with prescribing privileges had a MARR that was greater than the MARR for Medical Providers. As the office visit time length increased, the MARR also increased for MH Providers with prescribing privileges, Medical Providers and BH Providers in most cases. In most instances, the percentage of increase for MH Providers with prescribing privileges and Medical Providers was less than the increases for BH Providers. During 2016, the MARR decreased for PMHNPs as the session time increased from 45 to 60 minutes. The contract rate for 60 minutes (procedure code 90837) decreased by 16.7%. During 2017, the MARR decreased for Psychiatrists as the session time increased from 45 to 60 minutes. The contract rate for 60 minutes (procedure code 90837) decreased by 13.5%. During 2018, the MARR decreased for LPC/LMFTs as the session time increased from 30 to 45 minutes. The MARR for 45 minutes (procedure code 90834) decreased by 18%.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	The carrier reported MARRs for BH Providers, Medical Providers and MH Providers with prescribing privileges.
	90836	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	90838	60	During the Period of Review, the MARR for BH Providers was lower than the MARRs for Medical Providers and MH Providers with prescribing privileges. Also, in several instances, the MARR for MH Providers with prescribing privileges was higher than the MARR for Medical Providers. As the office visit time length increased, the MARR also increased for MH Providers with prescribing privileges, Medical Providers and BH Providers in most cases. In most instances, the percentage of increase for MH Providers with prescribing privileges, BH Providers were similar. During 2016, the MARR for PMHNPs decreased as the session time increased from 45 to 60 minutes. The contract rate for 60 minutes (procedure code 90838) decreased by 30.8%. Also during 2017 and 2018, the MARR for Psychiatrists decreased as the session time increased from 45 to 60 minutes. The MARR for 60 minutes (procedure code 90838) decreased by 26.4% in 2017 and by 42% in 2018.

Carrier 1, Plan B

Please note that a trend analysis was not performed on the carrier's Plan B since a MARR was not reported for most procedure codes. Also, those procedure codes reported, only contained MARRs for one provider type.

Carrier 1, Plan C

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	The carrier did not report MARRs for BH Providers during the Period of Review for this grouping of procedure codes. The carrier only reported MARRs for Medical Providers and MH Providers with prescribing privileges. During the Period of Review, there were several instances where the MH Providers with prescribing privileges had higher MARR than Medical Providers. As the office visit time length increased, the MARR also increased for Medical Providers and MH Providers with prescribing privileges in most cases. The percentage of increase for Medical Providers was comparable to the increases for MH Providers with prescribing privileges in most instances. During 2018, in reference to MH Providers with prescribing privileges only the MARR decreased as the session time increased from 45 to 60
	99202	20	
	99203	30	
	99204	45	
	99205	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			minutes. The contract rate for 60 minutes (procedure code 99205) decreased by 6.7% for NPs.
Established Patient E&M	99211	5	The carrier did not report MARRs for BH Providers during the Period of Review for this grouping of procedure codes. The carrier only reported MARRs for Medical Providers and MH Providers with prescribing privileges. During the Period of Review, Medical Providers had higher MARR than MH Providers with prescribing privileges. As the office visit time length increased, the MARR also increased for Medical Providers and MH Providers with prescribing privileges in most cases. In several instances, the percentage of increase for MH Providers with prescribing privileges was greater than the increases for Medical Providers. In reference to MH Providers with prescribing privileges, there were a few instances where the MARR decreased as the session time increased from 25 to 40 minutes (procedure code 99215). In particular, during 2015 the contract rate for NPs decreased by 14.7% and in 2017 and 2018, the MARR for PMHNPs decreased by 23.9% and 32.7% respectively. During 2016, the MARR for PMHNPs for a 25 minute visit was \$204.50 and for a 40 minute visit was \$210.40, which is only a 2.9% increase in the rate as the session time increased. This increase was significantly lower than all other provider types for this service during this year.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	The carrier did not report MARRs for Medical Providers during the Period of Review for this grouping of procedure codes. The Carrier only reported MARRs for BH Providers and MH Providers with prescribing privileges. During the Period of Review, MH Providers with prescribing privileges had higher MARR than Behavioral MH Providers with prescribing privileges in most instances. As the office visit time length increased, the MARR also increased for MH Providers with prescribing privileges and BH Providers in most cases. In most instances, the percentage of increase for MH Providers with prescribing privileges was less than the increases for BH Providers. During 2016, the MARR decreased for PMHNPs as the session time increased from 45 to 60 minutes. The rate for 60 minutes
	90834	45	
	90837	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			(procedure code 90837) decreased by 10.1% for PMHNPs.
Psychotherapy with E&M	90833	30	The carrier did not report a MARRs for Medical Providers during the Period of Review for this grouping of procedure codes. The Carrier only reported MARRs for BH Providers and MH Providers with prescribing privileges. Although MARRs were provided for BH Providers, in 2105 and 2016, the carrier reported MARRs for one procedure code in the grouping for BH Providers. As such, an analysis regarding MARRs and incremental increases in office visit times was not applicable for BH Providers. During 2016 and 2017, the MARR for PMHNPs and Psychiatrists decreased as the session time increased from 45 to 60 minutes. The MARR for 60 minutes (procedure code 90838) decreased by 17.2 in 2016 and 16.9% in 2017 for Psychiatrists and 9.5% in 2016 and 9.1% in 2017, for PMHHNPs. Also during 2017, the MARR for Psychiatrists decreased as the session time increased from 30 to 45 minutes. The contract rate for 45 minutes (procedure code 90836) decreased by 21.9%. During 2018, the MARR for PMHNPs decreased as the session time increased from 45 to 60 minutes. The contract rate for 60 minutes (procedure code 90838) decreased by 5.8%.

Carrier 2, Plans D

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for new patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased for MH Providers. Medical Provider rates decreased by -4.8% during 2017 for the increment from a 45 minute to a 60 minute visit (procedure code 99204 to 99205) and had increases in MARRs the balance of the Period of Review. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99202	20	
	99203	30	
	99204	45	
	99205	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit time length increased, the MARRs also increased for the BH Providers and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1% to 8.51% increase for the increment from a 45 minute to a 60 minute visit (procedure code 90834 to 90837).
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. Also, as the office visit time length increased, the MARR also increased equivalently for BH Providers and MH Providers.
	90836	45	
	90838	60	

Carrier 2, Plan E

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all new patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99202	20	
	99203	30	
	99204	45	
	99205	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit time length increased, the MARRs also increased for the BH Providers and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1 to 8.51% increase for the increment from a 45 minute to a 60 minute visit (procedure codes 90834 to 90837).
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	The carrier did not have Medical Providers MARRs for these time-based procedure codes. Also, as the office visit time length increased, the MARR also increased equivalently for BH Providers and MH Providers.
	90836	45	
	90838	60	

Carrier 2, Plan F

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under
	99212	10	
	99213	15	
	99214	25	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	99215	40	review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers, except during 2015, when Medical Provider rates decreased by -21% for the increment from a 25 minute to a 40 minute visit (procedure code 99214 to 99215). BH Providers did not have reimbursement rates for these E&M procedure codes.
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit time length increased, the MARRs also increased for the BH Providers and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1% to 8.5% increase for the increment from a 45 minute to a 60 minute visit (procedure codes 90834 to 90837).
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	The Carrier did not have MARRs for Medical Providers for these time-based procedure codes. Also, as the office visit time length increased, the MARR also increased equivalently for BH Providers and MH Providers.
	90836	45	
	90838	60	

Carrier 2, Plan G

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under
	99212	10	
	99213	15	
	99214	25	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	99215	40	review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit time length increased, the MARRs also increased for the BH Provider and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1% to 8.51% increase for the increment from a 45 minute to a 60 minute visit (procedure codes 90834 to 90837).
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. Also, as the office visit time length increased, the MARRs also increased equivalently for BH Providers and MH Providers.
	90836	45	
	90838	60	

Carrier 2, Plan H

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARRs also increased.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit
	90834	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	90837	60	time length increased, the MARRs also increased for the BH Providers and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1% to 8.51% increase for the increment from a 45 minute to a 60 minute visit (procedure code 90834 to 90837).
Psychotherapy with E&M	90833	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. Also, as the office visit time length increased, the MARR also increased equivalently for BH Providers and MH Providers.
	90836	45	
	90838	60	

Carrier 2, Plan I

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier did not have equivalent MARRs for time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased for both MH Providers and Medical Providers. BH Providers did not have reimbursement rates for these new patient E&M procedure codes.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. As the office visit time length increased, the MARRs also increased for the BH Providers and MH Providers. However, during 2018, the MH Providers had a 7.1% increase and the BH Providers ranged from an 8.1% to 8.51% increase for the increment from a 45 minute to a 60 minute visit (procedure code 90834 to 90837).
	90834	45	
	90837	60	
	90833	30	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
Psychotherapy with E&M	90836	45	The carrier did not have MARRs for Medical Providers for these time-based procedure codes. Also, as the office visit time length increased, the MARR also increased equivalently for BH Providers and MH Providers.
	90838	60	

Carrier 3, Plan J

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier had an equivalent MARR for outpatient (OP) time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M procedure codes under review. As the office visit time length increased, the MARR also increased by the same percentage for both provider type. BH Providers had no MARR for these procedure codes.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier had an equivalent maximum allowable reimbursement for OP time-based procedure codes for both in-network MH Providers and in-network Medical Providers for all established patient E&M procedure codes under review. As the office visit time length increased, the MARR also increased. BH Providers had no MARR for these procedure codes for these procedure codes.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During the Period of Review, MARRs for these time-based procedure codes were the same for Medical Providers and MH Providers, while BH Provider's rates were less. In addition, as the office visit time length increased from 30 to 45 minutes, the MARRs increased by the same percentage for all providers. However, as the office visit time length increased from 45 minutes to 60 minutes, MH Provider and Medical Provider rates increased by the same percentage, which was greater than for BH Provider rates. During 2016, all provider types' rates increased by 28.8% for the increment from a 30 minute to a 45 minute visit (i.e., from procedure code 90832 to 90834). In 2016, MH Provider and Medical Provider rates increased by 10% for the increment from a 45 minute to a 60 minute visit, while BH Provider rates increased by 9.1% for the same increment (i.e., from
	90834	45	
	90837	60	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			procedure code 90834 to 90837). During 2017, the MH Provider and Medical Providers had the same MARRs, while the BH Provider rates were less. However, in 2017, all provider types' rates increased by the same percentage for each additional 15 minute increment. The rates increased by 32.4% for the increment from 30 to 45 minutes and by 9.7% for the increment from 45 to 60 minutes. During 2018, the MH Provider and Medical Providers had the same MARRs, while the BH Provider rates were less. During 2018, all provider types' rates increased by 33% for the increment from a 30 minute to a 45 minute visit (i.e., from procedure code 90832 to 90834). Also in 2018, MH Provider and Medical Provider rates increased by 50% for the increment from a 45 minute to a 60 minute visit, while BH Provider rates increased by 7.7% for the same increment (i.e., from procedure code 90834 to 90837).
Psychotherapy with E&M	90833	30	During the Period of Review, MARRs for these time-based procedure codes were the same for Medical Providers and MH Providers, while BH Provider rates were less. All providers' rates increased by the same percentage as the office visit time length increased from 30 minutes to 45 minutes and from 45 minutes to 60 minutes.
	90836	45	
	90838	60	

Carrier 4, Plan K

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier had an equivalent maximum reimbursement rate for time-based procedure codes for both in-network behavioral mental health providers and in-network medical providers for all new patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier had an equivalent maximum reimbursement rate for time-based procedure codes for both in-network behavioral mental
	99212	10	
	99213	15	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
	99214	25	health providers and in-network medical providers for all established patient E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	99215	40	
Psychotherapy	90832	30	During the Period of Review, the carrier had an equivalent maximum reimbursement rate for time-based procedure codes for both in-network behavioral mental health providers and in-network medical providers for all psychotherapy codes under review. Also, as the office visit time length increased, the MARR also increased.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier had an equivalent maximum reimbursement rate for time-based procedure codes for both in-network behavioral mental health providers and in-network medical providers for all psychotherapy with E&M codes under review. Also, as the office visit time length increased, the MARR also increased.
	90836	45	
	90838	60	

Carrier 5, Plans L

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During 2017 and 2018, the Medical Providers generally had the highest MARRs associated with time-based procedure codes, which was between 2% to 30% higher, with the exception of 99202 in 2017 and 2018 when NPs had the same rate and 99203 in 2017 when NPs had the same rate. As the office visit time length increased, the MARR also increased with the exception of 99205 in 2017, where NPs' rate decreased 0.3% from 99204. The rate change varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During 2017 and 2018, one or both of the Medical Providers' MARRs was
	99212	10	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	99213	15	higher between 2% - 70%, with the exception of the 2017, Psychiatrists' rate for 99211, NPs' rate for 99213 and 99214 and the 2018, NPs' rate for 99214 which were the same as one or both of the Medical Provider rates. As the office visit time length increased, the MARR also increased, with the exception of the 2017, NPs 99215 rate that decreased 0.3% decrease from 99214. The rate of increase varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes.
	99214	25	
	99215	40	
Psychotherapy	90832	30	During 2017 and 2018, Psychologists had the highest MARRs. As the office visit time length increased, the MARR also increased, with the exception of 90837 in 2017, where there was no PMHNP rate, and in 2019, where there was no Psychiatrist rate. The carrier did not report MARRs for Medical Providers for these procedure codes.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During 2017 and 2018, Psychiatrists and PMHNPs had the highest MARRs. As the office visit time length increased, the MARR also increased with the exception of the MDs' rate for 90836 in 2017, and 90838 in 2018, as there were no rates provided. The rate of increase varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes.
	90836	45	
	90838	60	

Carrier 5, Plans M

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the MARRs for time-based procedure codes were highest for Medical Providers and NPs and lowest for PMHNPs with the exception of 2017, when the Psychiatrists' rate was the lowest for 99202, 99204 and 99205. As the office visit time length increased, the MARR also increased for all provider types where rates were provided. The rate of increase varied by provider type.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the MARRs for time-based procedure codes were highest for Medical Providers, while in numerous cases, NPs' rates and in one case in 2015, the Psychiatrists' rates were the same as the Medical Providers' rates. As the office visit time length increased, the MARR also increased, with two exceptions: 1) when the successive procedure code did not have a rate, and 2) for procedure code 99215 in 2017, wherein the MD rate decreased by 1.5%. The rate of increase varied by provider type.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During the Period of Review, Psychologists and/or LCSWs had the highest MARRs for time-based procedure codes. However, as the office visit time length increased, the MARR also increased, with the exception of procedure code 90837 for LCSWs in 2016.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the MARRs for time-based procedure codes
	90836	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	90838	60	was highest for Psychiatrists and/or PMHNPs. As the office visit time length increased, the MARR also increased, with the exception of when the successive code did not have a rate and procedure code. The rate of increase varied by provider type.

Carrier 5, Plans N

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the Medical Provider allowable reimbursement rates for time-based procedure codes were the highest, and in several instances, the NPs' rate was the same as the Medical Providers' rate. Also, as the office visit time length increased, the MARR also increased. The rate of increase varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the Medical Provider allowable reimbursement rates for time-based procedure codes were the highest and in several instances the NPs' rate was the same as the Medical Provider rate. Also, as the office visit time length increased, the MARR also generally increased, with the exception of when the successive code did not have a rate. The rate of increase varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes with exception of a LPC/LMFTs' rate for 99214 in 2017.
	99212	10	
	99213	15	
	99214	25	
	99215	40	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
Psychotherapy	90832	30	During the Period of Review, the Psychologists' MARRs for time-based procedure codes was the highest, with the exception of the 2015 and 2016 Psychiatrists' rate for 90834 and 90837, the 2016 Psychiatrists' rate for 90837 and the 2017 and 2018 NP's rate for 90837. Also, as the office visit time length increased, the MARR also increased, with the exception of when the successive code did not have a rate. The rate of increase varied by provider type. The carrier did not report MARRs for Medical Providers for these procedure codes in 2015 or 2016.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the MARRs for time-based procedure codes was the highest for Psychiatrists and PMHNPs in 2015 and 2016, Psychiatrists in 2017, Psychiatrists for 90833 in 2018 and PMHNPs for 90836 and 90838 in 2018. Also, as the office visit time length increased, the MARR also increased, with the exception of when the successive code did not have a rate. The rate of increase varied by provider type. The carrier did not report MARRs for BH Providers for these procedure codes, with the exception of procedure code 90833 in 2018.
	90836	45	
	90838	60	

Carrier 5, Plans O

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During 2015 and 2016, MARRs for time-based procedure codes were the highest for Medical Providers with the exception of the 2015 and 2016 NPs'
	99202	20	
	99203	30	
	99204	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	99205	60	rate for 99202 and the 99205 NPs' rate in 2016. As the office visit time length increased, the MARR also increased. However, during 2015, the rate of increase varied by provider type. The carrier did not report a MARRs for BH Providers for these procedure codes.
Established Patient E&M	99211	5	During 2015 and 2016, MARRs for time-based procedure codes were the highest for Medical Providers with the exception of the NPs' rates for 99211, 99214 in 2015 and 99212 in 2016. Also, as the office visit time length increased, the MARR also increased. The rate of increase varied by provider type. The carrier did not report a MARR for BH Providers for these procedure codes, with the exception of procedure code 99215 in 2015.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During 2015 and 2016, MARRs for time-based procedure codes were the highest for Psychologists, with the exception of code 90937, where the Psychiatrists' rates were highest. However, as the office visit time length increased, the MARR also increased with the exception of when the successive code did not have a rate. The rate of increase varied by provider type. The carrier did not report MARRs for Medical Providers, NPs or in 2016 for PMHNPs for these procedure codes.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During 2015, MARRs for time-based procedure codes were the highest for Psychiatrists and PMHNPs and in 2016, the rate was highest for PMHNPs. As the office visit time length increased, the MARRs also increased with the
	90836	45	
	90838	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			exception of when the successive code did not have a rate. The rate of increase varied by provider type. The carrier did not report MARRs BH or Medical Providers or these procedure codes, with the exception of an MD rate in 2015 for code 90836.

Carrier 6, Plan P

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier had a MARR for Medical Providers and MH Providers. For all procedure codes, Medical Providers had higher MARR. As the office visit time length increased, the MARR also increased for Medical Providers and MH Providers in all instances. The percentage of increase for Medical Providers was equivalent (within a percentage point) to the percentage of increase for MH Providers in all instances except for procedures codes 99201 and 99202. The percentage of increase between procedure codes 99201 and 99202 for Medical Providers ranged from 70.7% to 72.7% during the Period of Review, while MH Providers had a lower percent increase that ranged from 15.9% to 42.9%. BH Providers had no MARR.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	As previously noted in Report Chart 1 above, the Carrier had a MARR for Medical Providers and MH Providers during the Period of Review. For most procedure codes, Medical Providers had higher MARR. During the Period of Review, MH Providers had higher MARRs for procedure codes 99211 and 99212. As the office visit time length increased, the MARR also increased for Medical Providers in all instances, and in all instances for MH Providers except the two instances noted below. During 2015, MH Providers had the same MARR for procedure codes 99211 and 99212. This situation also occurred in 2016 regarding the Psychiatrists' MARR. The percentage of increase for Medical Providers was equivalent to the increases for MH Providers in reference to the percentage of increase between procedure codes 99213 and 99214, and also for procedure codes 99214 and 99215. However, the percentage of increase between procedure codes 99211 and 99212, and also for
	99212	10	
	99213	15	
	99214	25	
	99215	40	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			procedure codes 99212 and 99213 were lower for MH Providers. The percentage of increase for Medical Providers for procedure codes 99211 and 99212 ranged from 41.9% to 110.3% during the Period of Review while MH Providers had a lower percent increase that ranged from 0% to 6.9%. The percentage of increase for Medical Providers for procedure codes 99212 and 99213 ranged from 65.8% to 66.4% while MH Providers had a lower percent increase that ranged from 23.9% to 40.1%. BH Providers had no MARR.
Psychotherapy	90832	30	During the Period of Review, the carrier had a MARR for Medical Providers, MH Providers and BH Providers. For all procedure codes, MH Providers and BH Providers had a lower MARR than Medical Providers. As the office visit time length increased, the MARR also increased for Medical Providers, MH Providers and BH Providers in all instances. The percentage of increase for Medical Providers varied in relation to the increases for MH Providers and BH Providers as explained below. The percentage of increase between procedure codes 90832 and 90834 for Medical Providers ranged from 28.8% to 32.4% during the Period of Review while MH Providers had a higher percent increase that ranged from 39.6% to 40.2%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 36.1 % to 54.0%. The percentage of increase between procedure codes 90834 and 90837 for Medical Providers ranged from 46.4% to 50.2% during the Period of Review while MH Providers had a lower percent increase that ranged from 10.0% to 32.0%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 7.6% to 41.0%.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier had a MARR for Medical Providers, MH Providers and BH Providers. For all procedure codes, MH Providers and BH Providers had a lower MARR than Medical Providers. As the office visit time length increased, the MARR also increased for Medical Providers, MH Providers and BH Providers in all instances. The percentage of increase for Medical Providers varied in relation to the increases for MH Providers and BH Providers in all instances as explained below. The percentage of increase between procedure codes 90833 and 90836 for Medical Providers ranged from 26.5% to 26.6% while MH Providers had a higher
	90836	45	
	90838	60	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
			percent increase that ranged from 26.5% to 43.1%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 51.1% to 51.6%. The percentage of increase between procedure codes 90836 and 90838 for Medical Providers ranged from 32.2% to 59.1% during the Period of Review, while MH Providers had a lower percent increase that ranged from 20.5% to 32.9%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 32.4% to 35.0%.

Carrier 7, Plans Q and R

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network Medical Providers incrementally increased. The carrier's MARRs for time-based procedural codes for some in-network BH Providers and MH Providers incrementally increased while some remained the same. MARRs were included for Psychiatrists and Medical Providers for each of the noted time-based codes; however, MARRs were not included for some time-based procedural codes for the other providers.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier allowed blended MARRs for the in-network MH Providers and BH Providers but not for in-network Medical Providers using established patient E&M codes. As such, provider MARRs for BH and MH Providers varied from the MARRs used for Medical Providers.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network BH Providers and MH Providers varied from in-network Medical Providers for all psychotherapy procedure codes. As the office visit time length increased, the MARR also increased.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network BH Providers
	90836	45	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
	90838	60	and MH Providers varied from in-network Medical Providers for all psychotherapy with E&M procedure codes. As the office visit time length increased, the MARR also increased. MARRs were included for Psychologists for procedure code 90833. MARRs were not included for LCSWs and LPC/LMFTs for any psychotherapy with E&M procedure codes.

Carrier 8, Plan S

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network Medical Providers was greater than Psychologists and MH Providers. The incremental percentage increases for time-based procedural codes was greater for in-network Psychologists and MH Providers than in-network Medical Providers for procedure codes 99202 (20 minutes) 99203 (30 minutes) and 99205 (60 minutes). Medical Providers had a greater incremental increase for procedure code 99204 (45 minutes). However, as the office visit time length increased, the MARR also increased. MARRs were not included for LCSWs and LPC/LMFTs.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network Psychologists and MH Providers was less than Medical Providers. The incremental percentage increases for time-based procedural codes 99212 (10 minutes) and 99213 (15 minutes) was greater for in-network Medical Providers than Psychologists and MH Providers. However, the incremental percentage increases for time-based procedural codes 99214 (25 minutes) and 99215 (40 minutes) was greater for in-network Psychologists and MH Providers than Medical Providers. However, as the office visit time length increased, the MARR also increased. MARRs were not included for LCSWs and LPC/LMFTs.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network Psychiatrists
	90834	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	90837	60	was greater than NPs, PNHNPs, Psychologists, LCSWs and LPC/LMFTs. The MARRs incremental percentage increase for time-based procedural code 90834 (45 minutes) was greater for Psychologists, PMHNPs and NPs than Psychiatrists, LCSWs, and LPC/LMFTs. Psychiatrists had a greater incremental increase for procedure code 90837 (60 minutes) than Psychologists, PMHNPs, NPs, LCSWs and LPC/LMFTs. However, as the office visit time length increased, the MARR also increased.
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier's MARRs for time-based procedural codes for in-network Psychiatrists was greater than NPs, PNHNPs, Psychologists, LCSWs and LPC/LMFTs. The MARRs for time-based procedural codes for in-network BH Providers and MH Providers increased as the office visit time length increased.
	90836	45	
	90838	60	

Carrier 9, Plan T

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier's MARR for Medical Doctors is higher than the MARR for MH Providers and BH Providers for all new patient E&M codes under review. In some instances, as the office visit time length increased (45 minutes to 60 minutes), the MARR decreased or only slightly increased. MH Providers, specifically NPs, and Medical Providers, specifically DOs, had the greatest decrease in 2016 in the MARR as the office visit time duration decreased 31.4% from a 45-minute visit to a 60-minute visit. Breakout by year of the provider types that included decreasing MARRs from a 45-minute visit to a 60-minute visit: 2015, DOs - decreasing MARR 2016, DOs and NPs - decreasing MARR 2017, DOs - decreasing MARR 2018, DOs and NPs - decreasing MARR
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier's MARR for Medical Doctors is higher than the MARR for MH Providers and BH Providers for all established patient
	99212	10	
	99213	15	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
	99214	25	E&M codes under review. In some instances, as the office visit time length increased (25 minutes to 40 minutes), the MARR stayed the same or decreased. Psychiatrists had the greatest decrease in 2015 in the MARR as the office visit time duration decreased 41.9% from a 25-minute visit to a 40-minute visit. Breakout by year of the provider types that included decreasing MARRs or blended MARRs: 2015, Psychiatrists- decreasing MARR 2016, LCSWs, LPCs, LMFTs and DOs - decreasing MARR 2018, Psychiatrists - decreasing MARR; LCSWs, LPCs, LMFTs - blended MARR (difference of \$0.07) between a 25-minute visit and a 40 minute visit.
	99215	40	
Psychotherapy	90832	30	During the Period of Review, the MARR was not the same for all provider types. In 2015 and 2016, LCSWs had the highest MARRs. From 2017 to 2018, Psychologists had the highest MARRs. In some instances, as the office visit time length increased (45 minutes to 60 minutes), the MARR decreased. Breakout by year of the provider types that included decreasing MARRs from a 45-minute visit to a 60-minute visit: 2015, Psychiatrists, Psychologists and MDs - decreasing MARR 2016, LCSWs, LPCs and LMFTs - decreasing maximum allowable reimbursement 2017, LCSWs - decreasing MARR 2018, LCSWs - decreasing MARR
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the MARR was not the same for all provider types. In 2015, Psychiatrists and MDs had the highest MARR. From 2016 to 2018, all mental health providers with prescribing privileges had the highest MARR. In some instances, as the office visit time length increased, the MARR decreased or stayed the same. Breakout by year of the provider types that included decreasing MARRs or blended MARRs:
	90836	45	
	90838	60	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
			2015, Psychiatrists, Psychologists and MDs - decreasing MARR; blended rate LCSWs, LPCs, LMFTs, NPs and PMHNP 2016, Psychologists - decreasing MARR; Psychiatrists - equivalent MARR (0.1%) with a difference of \$0.16 between a 45 minute visit and 60 minute visit 2017, Psychologists and MDs - decreasing MARR 2018, Psychologists and MDs - decreasing MARR

Carrier 10, Plan U

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the MARRs for Psychiatrists were the same as Medical Providers for all new patient E&M time-based procedure codes under review except in 2017, when Medical Providers had a rate about 1% higher. As the office visit time length increased, the MARR also increased. PMHNPs had a lower MARR than Psychiatrists and Medical Providers in 2015 and 2016. Starting in 2017 thru 2018, PMHNPs and NPs had the same MARR as Psychiatrists. In 2018, the MARR was the same for all Medical Providers and MH Providers. The carrier did not report a MARR for BH providers for these procedure codes during the Period of Review and for NPs from 2015-2016.
	99202	20	
	99203	30	
	99204	45	
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the MARRs for Psychiatrists were the same as Medical Providers for all new patient E&M time-based procedure codes under review except in 2017, when Medical Providers had a
	99212	10	
	99213	15	
	99214	25	

Procedure Code Grouping	Procedure Codes Included	Time (minutes)	Results of Analysis
	99215	40	rate about 1% higher. As the office visit time length increased, the MARR also increased. PMHNPs had a lower MARR than Psychiatrists and Medical Providers in 2015 and 2016. Starting in 2017 thru 2018, PMHNPs and NPs had the same MARR as Psychiatrists. In 2018, the MARR was the same for all Medical Providers and MH Providers with prescribing privileges. The carrier did not report a MARR for BH providers for these procedure codes during the Period of Review and for NPs from 2015-2016.
Psychotherapy	90832	30	During the Period of Review, the carrier had the same MARRs for Medical Providers, Psychiatrists, LCSWs and Psychologists in all years except 2017 when the rate for Medical Providers was about 1% higher. Some BH Providers, specifically LPC/LMFTs (2015 to 2017), and some MH Providers, specifically NPs (2017 only) and PMHNPs (2015 to 2017), did not have equivalent MARRs except in 2018 when the rate was the same for all provider types. As the office visit time length increased, the MARR also increased. The carrier did not report MARRs for NPs in 2015 and 2016.
	90834	45	
	90837	60	
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier had the same MARRs for Medical Providers, Psychiatrists, and Psychologists in all years except 2017 when the rate for Medical Providers was about 1% higher. NPs (2017 only) and PMHNPs (2015 to 2017), did not have equivalent MARRs except in 2018 when the rate was the same for all provider types. As the office visit time length increased, the MARR also increased. The carrier did not report a MARR for LCSWs, and LPC/LMFTs during the Period of Review. The carrier did not report MARRs for NPs in 2015 and 2016.
	90836	45	
	90838	60	

Carrier 11, Plan V

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
New Patient E&M	99201	10	During the Period of Review, the carrier had a MARR for Medical Providers and MH Providers. For all procedure codes, Medical Providers had higher MARR. As the
	99202	20	
	99203	30	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	99204	45	office visit time length increased, the MARR also increased for Medical Providers and MH Providers in all instances. The percentage of increase for Medical Providers was equivalent (within a percentage point) to the percentage of increase for MH Providers in all instances except for procedures codes 99201 and 99202. The percentage of increase between procedure codes 99201 and 99202 for Medical Providers ranged from 70.7% to 72.7% during the Period of Review, while MH Providers had a lower percent increase that ranged from 15.9% to 42.9%. BH Providers had no MARR.
	99205	60	
Established Patient E&M	99211	5	During the Period of Review, the carrier had a MARR for Medical Providers and MH Providers. For most procedure codes, Medical Providers had higher MARR. During the Period of Review, MH Providers had higher MARRs for procedure codes 99211 and 99212. As the office visit time length increased, the MARR also increased for Medical Providers in all instances, and in all instances for MH Providers except the two instances noted below. During 2015, MH Providers had the same MARR for procedure codes 99211 and 99212. This situation also occurred in 2016 regarding the Psychiatrists' MARR. The percentage of increase for Medical Providers was equivalent to the increases for MH Providers in reference to the percentage of increase between procedure codes 99213 and 99214, and also for procedure codes 99214 and 99215. However, the percentage of increase between procedure codes 99211 and 99212, and also for procedure codes 99212 and 99213 were lower for MH Providers. The percentage of increase for Medical Providers for procedure codes 99211 and 99212 ranged from 41.9% to 110.3% during the Period of Review while MH Providers had a lower percent increase that ranged from 0% to 6.9%. The percentage of increase for Medical Providers for procedure codes 99212 and 99213 ranged from 65.8% to 66.4% while MH Providers had a lower percent increase that ranged from 23.9% to 40.1%. BH Providers had no MARR.
	99212	10	
	99213	15	
	99214	25	
	99215	40	
Psychotherapy	90832	30	During the Period of Review, the carrier had a MARR for Medical Providers, MH Providers and BH Providers. For
	90834	45	

Procedure Code Grouping	CPT Codes Included	Time (minutes)	Results of Analysis
	90837	60	all procedure codes, MH Providers and BH Providers had a lower MARR than Medical Providers. As the office visit time length increased, the MARR also increased for Medical Providers, MH Providers and BH Providers in all instances. The percentage of increase for Medical Providers varied in relation to the increases for MH Providers and BH Providers as explained below. The percentage of increase between procedure codes 90832 and 90834 for Medical Providers ranged from 28.8% to 32.4% during the Period of Review while MH Providers had a higher percent increase that ranged from 39.6% to 40.2%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 36.1 % to 54.0%. The percentage of increase between procedure codes 90834 and 90837 for Medical Providers ranged from 46.4% to 50.2% during the Period of Review while MH Providers had a lower percent increase that ranged from 10.0% to 32.0%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 7.6% to 41.0%.
Psychotherapy with E&M	90833	30	During the Period of Review, the carrier had MARRs for Medical Providers, MH Providers and BH Providers. For all procedure codes, MH Providers and BH Providers had a lower MARR than Medical Providers. As the office visit time length increased, the MARR also increased for Medical Providers, MH Providers and BH Providers in all instances. The percentage of increase for Medical Providers varied in relation to the increases for MH Providers and BH Providers in all instances as explained below. The percentage of increase between procedure codes 90833 and 90836 for Medical Providers ranged from 26.5% to 26.6% while MH Providers had a higher percent increase that ranged from 26.5% to 43.1%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 51.1% to 51.6%. The percentage of increase between procedure codes 90836 and 90838 for Medical Providers ranged from 32.2% to 59.1% during the Period of Review, while MH Providers had a lower percent increase that ranged from 20.5% to 32.9%. Also, the percentage of increase between these procedure codes for BH Providers ranged from 32.4% to 35.0%.
	90836	45	
	90838	60	