QUESTION: Is the Postpartum Depression Screening billed separately or included in the OB package? Also, can you please tell me the appropriate CPT codes to use for administering Edinburgh Postnatal Depression Screening and PHQ-9?

ANSWER: If the physician is providing the global obstetrical service (and reporting a global code), the payer may consider screening depression as part of the global service and not reimburse additionally for the service. This is particularly true if the physician screens every patient for depression as routine. However, some payers may reimburse for this service. Physicians should check with their specific payers.

However, if the physician diagnoses depression, you may report it separately since the global package was valued for uncomplicated antepartum, delivery and postpartum care. You should be aware, though, that some payers will only reimburse psychologists and psychiatrists for treating depression. You need to know your specific payer policies.

Please note that for 2019 ICD-10 codes, category F53, Puerperal psychosis, was revised to include two new codes, F53.0, Postpartum depression, and F53.1, Puerperal psychosis.

When using Edinburgh Postnatal Depression Screening (EPDS) to screen for depression in pregnant/postpartum patients, it is more appropriate to report CPT code 96160, Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument.

For HPQ-9 depression screening, some payers accept E/M code with modifier 25 billed with 96161/96160, while other request using CPT code 96127, Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument.

For 2019, a new code 96146 has been developed to describe an automated psychological or neuropsychological test that includes generation of an automated result. This test is performed using an electronic platform (eg, computer) and the results of the test are automatically generated. Code 96146 should be reported once per session [CPT Assistant, October 2018].

96146, Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only (If test is administered by physician, other qualified health care professional, or technician, do not report 96146. To report, see 96127, 96136, 96137, 96138, 96139).