

**TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE
SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES
PART 1. PHYSICIANS**

317:30-5-11. Psychiatric services

(a) Payment is made for procedure codes listed in the Psychiatry Series section of the most recent edition of the ~~CPT codes~~ American Medical Association Current Procedural Terminology codebook. The codes in this service range are accepted services within the Medicaid SoonerCare program for children and adults with the following exceptions:

- (1) Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes.
- (2) Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist the patient.
- (3) Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purposes) for other physicians, agencies, or insurance carriers.
- (4) Unlisted psychiatric service or procedure.

(b) All services must be medically necessary and appropriate and include a DSM Diagnostic and Statistical Manual (DSM) multi axial diagnosis completed for all five axes from the most recent version of the DSM.

(c) Services in the psychiatry series of the CPT manual must be provided by a board eligible or board certified psychiatrist or a physician, physician assistant, or nurse practitioner with additional training that demonstrates the knowledge to conduct the service performed. ~~Documentation of training for physicians who are not board eligible or board certified psychiatrists should be submitted to the Medical Director of the OHCA.~~ For general physicians (M.D. or D.O.), payment is made for the appropriate medical procedure code(s) and not for psychiatric procedure codes.

(d) No services in the psychiatry series of the CPT manual may be provided via telemedicine or other electronic medium, with the exception of "pharmacologic management". Pharmacological management may be performed via telemedicine under the following circumstances:

- (1) A healthcare professional with knowledge of the patient must accompany and attend the patient during the performance of the service.
- (2) The psychiatrist performing the service or in the case of a group practice or agency, another psychiatrist within that practice or agency must have seen the patient receiving the service during either a psychiatric exam or previous pharmacologic management session or other face-to-face psychiatric service.
- (3) The patient must understand the procedure including the technologic aspects of the process and agree, in writing, to having his/her pharmacological management session via electronic equipment.

(e) The telecommunications equipment must provide clear images of the psychiatrist to the patient. The psychiatrist must have a clear visual field to effectively evaluate the physical condition of the patient, including but not limited to extrapyramidal symptoms, injuries and

changes in weight. Audio reception must be sufficient for the patient and physician to clearly hear one another's conversation.