

Understanding When and How to Use Interactive Complexity (90785) and Sign Language and Oral Interpretive Services (T1013)

90785 Interactive Complexity

Interactive complexity refers to specific communication factors that complicate the delivery of a psychiatric procedure. Common factors include more difficult communication with discordant or emotional family members and engagement of young and/or verbally undeveloped or impaired beneficiaries. Use 90785 when any of the following are present:

- 1. The need to manage maladaptive communication (related to e.g., high anxiety, high reactivity, repeated questions, or disagreement) among participants that complicates delivery of care.
- 2. Caregiver emotions or behaviors that interfere with the caregiver's understanding and ability to assist in treatment.
- 3. Evidence or disclosure of sentinel event and mandated report to third party (e.g., abuse or neglect with report to state agency) with initiation of discussion of the sentinel even and/or report with beneficiary and other visit participants.
- 4. Use of play equipment or other physical devices to communicate with the beneficiary to overcome barriers to therapeutic or diagnostic interaction.

Restrictions and guidance for using Interactive Complexity:

- ➤ When using 90785 in conjunction with 90853 Group Psychotherapy, use only for the specific beneficiary for whom the code applies.
- ➤ Do not use 90785 in conjunction with crisis psychotherapy codes 90839 and 90840.
- ➤ Do not use 90785 with E&M codes 99202-99205 and 99212-99215 when provided without psychotherapy.
- Interactive Complexity (90785) and Interpretation (T1013) cannot be claimed together.

T1013 Sign Language or Oral Interpretive Services

A claim for interpretation should be submitted when the provider and the patient cannot communicate in the same language, and the provider uses an on-site interpreter and/or individual trained in medical interpretation to provide medical interpretation.

Restrictions and guidance for using T1013:

- ➤ A claim for interpretation (T1013) cannot exceed the claim for the primary service, e.g., if 60 minutes of therapy is provided and an interpreter is used, the accompanying claim of T1013 cannot exceed 60 minutes.
- > A claim for interpretation (T1013) should not be submitted if the provider delivers the treatment and communicates information to the beneficiary in the beneficiary's language.
- ➤ The person providing the interpretation does not bill for their interpretation services. The person providing the SMHS bills for the interpretation service using the add on code T1013MH.
- > Interpretation may not be claimed when using an automated/digital translation or relay services.