

Service Table 3-Medication Support Codes

Medication Support Services include one or more of the following: prescribing, administering, dispensing and monitoring drug interactions and contraindications of psychiatric medications or biologicals that are necessary to alleviate the suffering and symptoms of mental illness. This service may also include assessing the appropriateness of reducing medication usage when clinically indicated. Medication Support Services are individually tailored to address the beneficiary's need and are provided by a consistent provider who has an established relationship with the beneficiary.

Services may include: providing detailed information about how medications work; different types of medications available and why they are used; anticipated outcomes of taking a medication; the importance of continuing to take a medication even if the symptoms improve or disappear (as determined to be clinically appropriate); how the use of the medication may improve the effectiveness of other services a beneficiary is receiving (e.g., group or individual therapy); possible side effects of medications and how to manage them; information about medication interactions or possible complications related to using medications with alcohol or other medications or substances; and the impact of choosing not to take medications.

The service includes one or more of the following service components:

- Evaluation of the need for medication
- Evaluation of clinical effectiveness and side effects
- The obtaining of informed consent
- Medication education including instruction in the use, risks, and benefits of and alternatives for medication
- Collateral
- Plan Development

[Title 9, CCR, § 1840.372](#) states that “the maximum amount claimable for Medication Support Services in a 24-hour period is 4 hours.”

Please note that, the prolonged service code G2212 is in the Medication Support category. G2212 can be used to prolong a code that does not have a dedicated add-on code associated with it or an evaluation and management code that is at the end of a series (ie, is associated with the longest time). The codes G2212 can be used with are listed in the Dependent on Codes Column. The [Centers for Medicare & Medicaid Services does not recognize any other prolonged service code](#) and G2212 is therefore the only prolonged service code recognized by the SDMC claiming system. Therefore if a different prolonged service code is claimed, it will be denied.

Service	Code	SD/MC Allowable Disciplines	Allowable Place of Service	Lockout Codes <small>Note: All of the below services are locked out against inpatient except the day of admission.</small>	Dependent on Codes	Medicare COB Required?	Maximum Units that Can be Billed	Allowable Modifiers
Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-Face with New Patient with Assessment and Intervention, 15 Minutes	99605	<ul style="list-style-type: none"> Pharm 	All except 09	Cannot be billed with: 90791 90792 90832-90834 90836-90840 90845 90847 90849 90853 90865 90870 99202-99205 99212-99215 99217-99220 99231-99236 99304-99310 99324-99328 99334-99337 99341-99345 99347-99350 99484 99606**	No	No	1	27 59 95 HK HL HV XE XP XU
Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-	99606	<ul style="list-style-type: none"> Pharm 	All except 09	Cannot be billed with: 90791 90792 90832-90834 90836-90840 90845	No	No	1	27 59 95 HK HL HV

Service	Code	SD/MC Allowable Disciplines	Allowable Place of Service	Lockout Codes <small>Note: All of the below services are locked out against inpatient except the day of admission.</small>	Dependent on Codes	Medicare COB Required?	Maximum Units that Can be Billed	Allowable Modifiers
Face with Established Patient with Assessment and Intervention, 15 Minutes				90847 90849 90853 90865 90870 99202-99205 99212-99215 99217-99220 99231-99236 99304-99310 99324-99328 99334-99337 99341-99345 99347-99350 99484 99605				XE XP XU
Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-Face with Patient with Assessment and Intervention, each Additional 15 Minutes beyond 99605 or 99606.	99607	<ul style="list-style-type: none"> Pharm 	All except 09	Cannot be billed with: 99484	99605 99606	No	15	27 59 95 HK HL HV XE XP XU
Prolonged Office or Other Outpatient	G2212	<ul style="list-style-type: none"> MD/DO PA 	All except 09	No	90791 90792 90837	Yes	14	GC HK HL

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Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes		<ul style="list-style-type: none"> • NP or CNS (Certified) • PhD/PsyD • LCSW (Licensed, Registered or Waivered) • PCC (Licensed, Registered or Waivered) • MFT (Licensed, Registered or Waivered) • Pharm • RN • LVN 			90838 90845 90847 90849 90853 90865 90870 90880 90885 96105 96110 96125 96127 96146 96367 96368 96372 96373 96376 96377 99205 99215 99217 99220 99223 99233 99236 99245 99255 99306 99310			HV SC

Service	Code	SD/MC Allowable Disciplines	Allowable Place of Service	Lockout Codes <i>Note: All of the below services are locked out against inpatient except the day of admission.</i>	Dependent on Codes	Medicare COB Required?	Maximum Units that Can be Billed	Allowable Modifiers
					99337 99350			
Oral Medication Administration, Direct Observation, 15 Minutes	H0033	<ul style="list-style-type: none"> All disciplines, including non-licensed. 	All except 09	No	No	No	16	GC HK HL HV SC
Medication Training and Support, per 15 Minutes	H0034	<ul style="list-style-type: none"> MD/DO Pharmacist PA NP or CNS (Certified) RN LVN PT 	All except 09	No	No	No	16	GC HK HL HV SC

*Except with modifiers 59, XE, XP, or XU. Modifiers have to be on the target or excluded service.

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