

PSYCHOTHERAPY SERVICES

Documentation Checklist Tool

The purpose of this Tool is to guide the provider to appropriately document required components.

Required for all Psychotherapy Services	Yes	No
Is the provider an MD, DO, NP, PA, CCNS, Clinical Psychologist or Clinical Social Worker?		
Is the diagnosis codes F72, F73, F78, or F79-Severe and profound mental retardation?		
Does the documentation support the visit was only performed for monitoring of Activity of Daily Living (ADL); teaching grooming skills or teaching social skills?		
Does the documentation contain the time for the service performed?		
Are ALL the following present in the documentation for the individualized treatment plan: type, amount, frequency, duration, diagnosis, anticipated goals?		
Does the clinical note support a face to face visit with the patient present and participating?		
Does the clinical note support the diagnosis, symptoms, functional status, mental status exam, treatment plan, prognosis and progress of the patient?		
Does the documentation support therapeutic maneuvers; communication attempts supportive or interpretive interactions to produce a therapeutic change?		
Is there a periodic summary of goals, progress toward goals, and an updated treatment plan included in the medical record?		
Is there reasonable expectation of improvement or reasonable expectation that if treatment services were withdrawn, the patient's condition would deteriorate?		
Frequency/Duration: Does the evidence show that the patient continues to show improvement in accordance with the treatment plan? Is the frequency within accepted norms of medical practice?		
Is the time noted in the documentation to support the level of service billed?		
Does all documentation meet signature requirements and include the name, signature and credentials of the person performing the service?		

References

- Outpatient Psychiatry & Psychology Services (LCD L34353) Fact Sheet A/B MAC Jurisdiction 15): https://www.cgsmedicare.com/pdf/psychotherapy_checklist.pdf
- CGS Local Coverage Determination (LCD) L34353:
 - CGS Policy Page: <https://www.cgsmedicare.com/partb/medicalpolicy/index.html>
 - LCD Outpatient Psychiatry & Psychology Services (L34353): https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=34353&ContrId=239&ver=27&ContrVer=1&CntrctrSelected=239*1&Cntrctr=239&DocType=2&bc=AAAAgACAAAA&
- Medicare Mental Health MLN Booklet(1986542), Medical Records Checklist: Outpatient Psychiatric Services: <https://www.cms.gov/files/document/medicare-mental-health.pdf>
- Medicare Program Integrity Manual, Ch 3 Verifying Potential Errors & Taking Corrective Action: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf>

