

# MEDICAL POLICY

MEDICAL POLICY DETAILS	
Medical Policy Title	Psychological Testing
Policy Number	3.01.02
Category	Contract Clarification
Original Effective Date	10/18/01
Committee Approval Date	03/28/02, 03/27/03, 2/26/04, 04/28/05, 06/22/06, 08/23/07, 06/26/08, 06/25/09, 08/26/10, 08/25/11, 08/23/12, 08/22/13, 06/26/14, 06/25/15, 08/25/16, 08/25/17, 08/23/18, 10/24/19, 10/22/20, 12/16/21, 04/21/22, 12/22/22, 12/21/23
Current Effective Date	12/21/23
Archived Date	N/A
Archive Review Date	N/A
Product Disclaimer	<ul style="list-style-type: none"> <li>• If a product excludes coverage for a service, it is not covered, and medical policy criteria do not apply.</li> <li>• If a commercial product (including an Essential Plan or Child Health Plus product), medical policy criteria apply to the benefit.</li> <li>• If a Medicaid product covers a specific service, and there are no New York State Medicaid guidelines (eMedNY) criteria, medical policy criteria apply to the benefit.</li> <li>• If a Medicare product (including Medicare HMO-Dual Special Needs Program (DSNP) product) covers a specific service, and there is no national or local Medicare coverage decision for the service, medical policy criteria apply to the benefit.</li> <li>• If a Medicare HMO-Dual Special Needs Program (DSNP) product DOES NOT cover a specific service, please refer to the Medicaid Product coverage line.</li> </ul>

## POLICY STATEMENT

- I. Based upon our criteria and assessment of the peer-reviewed literature, psychological testing has been medically proven to be effective and, therefore, is considered **medically appropriate** for **ANY** of the following reasons:
  - A. To diagnose a psychiatric condition when a diagnostic question remains following an evaluation and recommendation by a licensed behavioral health provider (e.g., initial psychiatric evaluation consisting of interviews with collateral sources are appropriate, review of medical records, and consultation with other treating providers) and testing results would generate necessary information to impact the member's care and treatment; **OR**
  - B. To diagnose an intellectual developmental disability (intellectual disability) following an evaluation and recommendation by the treating medical provider when the results of psychological testing would generate necessary information to impact the member's care and treatment (*see Policy Guidelines VI to X*).
- II. Based upon our criteria and assessment of the peer-reviewed literature, the *routine* use of psychological testing or computer-based psychological testing (e.g., Quotient ADHD System, QbTest, Test of Variables of Attention [TOVA]) is considered **not medically necessary** for purposes of diagnosing any of the following neurodevelopmental disorders, as more suitable approaches are available:
  - A. Attention-deficit/hyperactivity disorder (ADHD) (*see Policy Guideline IX.*);
  - B. Tourette's syndrome; **OR**
  - C. Autism spectrum disorder (ASD) (*see Policy Guideline X.*)

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- III. Based upon our criteria and assessment of the peer-reviewed literature, the *routine* use of psychological testing as a screening tool or as part of the behavioral health evaluation prior to a complex surgical procedure (e.g., bariatric surgery) or for a complex medical condition (e.g., chronic pain) is considered **not medically necessary**.
- IV. Psychological testing is considered not medically necessary if it has been performed in the last 12 months.
- V. Psychological testing is ineligible for coverage when the testing is primarily for the purpose of non-treatment-related or service eligibility issues.

Refer to Corporate Medical Policy #2.01.50 Neuropsychological Testing

### POLICY GUIDELINES

- I. Preauthorization is contract dependent. Please contact your local Customer Care (Member/Provider) Department, to determine coverage under a member's subscriber contract.
- II. **ALL** the following documentation is required to determine medical necessity, and the requesting provider should submit these records within 30 days of the diagnostic evaluation.
  - A. Detailed description of the referral question (e.g., overlapping behavioral health symptoms leading to diagnostic uncertainty); **AND**
  - B. A copy of the initial diagnostic evaluation with the patient, including review of the patient's full developmental history, collateral interviews, and behavioral observation, if needed.
- III. Psychological tests are only one (1) element of a psychological assessment and should never be used alone as the sole basis for a diagnosis. A detailed history of the patient and a review of the patient's psychological, medical, educational, or other relevant records are required to lay the groundwork for interpreting the results of any psychological measurement.
- IV. Psychological testing performed as simple, self-administrated or self-scored inventories, or screening tests such as, but not limited to, AIMS, Folstein Mini-Mental Status Exam, PHQ-9, Hamilton Rating Scale for Depression, Connors Rating Scale, Eat-26, Quotient ADHD System, are considered inclusive of an Evaluation and Management service. In addition, brief emotional/behavioral assessments are not covered as psychological testing. Likewise, tests that are patient-completed tools or that are administered by ancillary staff in an office (e.g., PHQ-2, PHQ-9, MAST, CAGE, AUDIT, ORT, and Pain scale) are not considered psychological testing and should not be billed utilizing these codes.
- V. At least two validated psychological tests are required, to bill for psychological testing. A single, stand-alone test, even a multi-faceted one, does not constitute a psychological evaluation service. Psychological testing may include, but is not limited to, the following: Minnesota Multiphasic Personality Inventory-2 (MMPI-2)/Minnesota Multiphasic Personality Inventory-A (MMPI-A), Wechsler Adult Intelligence Scale-Revised (WAIS-III/IV), Personality Assessment Inventory (PAI), and Rorschach Inkblot Method.
- VI. Psychological testing, when performed for any of the following reasons, is usually contractually excluded and ineligible for coverage:
  - A. Educational or vocational purposes that are primarily related to employment.
  - B. If eligible for testing within the school district, to aid in the diagnosis of a learning disability or an intellectual disability, as this is the responsibility of the school district (*also see Guideline IX.*).
  - C. Job aptitude, court-ordered evaluations for legal defense; **OR**
  - D. Renewal of services with a person who has well-documented, decreased cognition/IQ.
- VII. Coverage is not available for services provided by school districts for pre-school-aged children (three to five years) and school-aged children (five to 21 years), as they are considered free care.
  - A. When applicable, in accordance with applicable state and federal rules, members should have a committee on special education evaluation completed through the school district before a request for coverage is submitted to the Health Plan. Documentation should be provided demonstrating the evaluation and results, and the timing of any testing associated with the evaluation.

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- B. If a child is home-schooled, an assessment by the school district should be completed prior to submitting a request to the Health Plan for coverage. Requests for services for home-schooled children outside New York State will be reviewed on an individual basis in accordance with state regulations for the state in which the child lives.
  - C. Psychological testing that is denied by the school district will be reviewed by the Health Plan for medical necessity in accordance with the member's subscriber contract.
- VIII. Psychological testing requires a clinically trained examiner. All psychological tests should be administered, scored, and interpreted by a trained professional, preferably a psychologist or psychiatrist with expertise in the appropriate area. The interpretation and written report should be completed by the psychologist. These services are all-inclusive in the number of hours authorized.
- IX. Compared to clinical interviews, psychological testing has not been found to reliably improve diagnostic accuracy of ADHD. Testing may be medically appropriate in adults after a thorough, diagnostic evaluation when the patient's history, presentation, and/or findings do not consistently indicate an ADHD diagnosis.
- X. When the primary referral question is to determine the presence of an intellectual disability or neurodevelopmental disorder such as the diagnosis of autism spectrum disorder (ASD) (i.e., assess developmental skill acquisition appropriate for age, loss of previously acquired skills, or failure to attain expected skills), developmental testing (CPT codes 96112-96113) may be medically appropriate when a diagnosis is unable to be made by other methods (e.g., standardized parent interviews or direct, structured behavioral observation).
- XI. The number of hours requested includes the total time necessary to complete administration of two or more tests, scoring, interpretation, clinical decision-making, treatment-planning, and report, as well as interactive feedback to the patient, family member(s) or caregiver(s). The proposed time for test administration and scoring of the selected tests may not exceed the administration time established by the test's publishers, plus appropriate time to score. A request for additional test administration time may be considered medically necessary when supported by evidence of extenuating circumstances that is submitted by the provider. Examples of extenuating circumstances include the following:
- A. The patient has significant functional impairment, for example:
    - 1. Sensory deficits and/or physical disabilities that necessitate modification in standard administration procedures.
    - 2. Severe oppositional behavior.
    - 3. Attention deficits or an intellectual developmental disability (intellectual disability) that require the examiner to provide frequent redirection and/or breaks for the patient during testing.

\*Note: Testing should not be conducted if extenuating circumstances such as these are so severe that it could reasonably pose a threat to the reliability or validity of test results.
  - B. The patient has an intellectual disability.
  - C. The patient requires an interpreter, as English is not the patient's primary language.

### **DESCRIPTION**

Psychological tests, also known as psychometric tests, are standardized instruments that are used to measure behavior or mental attributes. These attributes may include attitudes, emotional functioning, intelligence and cognitive abilities, aptitude, personality characteristics, and to evaluate mental health (e.g., psychological functioning or signs of psychological or neurological disorders) (APA, 2022).

Tests include standardized aptitude and achievement instruments, diagnostic and evaluative devices, interest inventories, personality inventories, and projective instruments. Psychological test administration and scoring is the formal process of administering reliable and validated tests selected by the trained professional according to standardized test manual instructions and scoring the respondent's answers to test items.

The APA Guidelines (2020) indicates individual performance on psychological tests is only one piece of assessment and is conceptualized in a context of presenting concerns (e.g., reason for referral, background, course of illness, influential

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factors, and population-specific contributions) that are secured from multiple sources. These may include clinical interview with the examinee, clinical interview with sources other than the examinee, completion of valid self-report and third-party report measures, observation of behavior, and review of relevant records. The more information gathered prior to the testing, assessment, or evaluation and an understanding of these characteristics or variables should assist in selecting a reliable and valid test or instrument to use among the myriad ones available commercially or in research.

Advances in technology have impacted the field of psychological assessment, including the real-time role-play simulations, virtual reality exercises.

The QbTest is a 20-minute test that has received approval from the United States Food and Drug Administration (FDA) for use in conjunction with a clinical assessment, to provide clinicians with objective measures of hyperactivity, impulsivity, and inattention to aid in the clinical assessment of ADHD. The test involves infrared motion-tracking to measure activity, and results are interpreted by qualified professionals.

The Quotient ADHD System is a computerized test that measures hyperactivity, inattention, and impulsivity. After completion of the approximately 30-minute, self-administered test, patterns of motion, accuracy of the responses, and fluctuation in attention state are analyzed and scored using proprietary algorithms. The patient's scores are then compared to those of other individuals of the same age and gender, to aid in the clinical assessment of ADHD.

The Test of Variables of Attention (TOVA) received Food & Drug Administration (FDA) 501(k) premarket clearance in 2018. TOVA is a culture- and language-free, sufficiently long computerized test that requires no left/right discrimination or sequencing. The computer-based test provides healthcare professionals with objective measurements of attention and inhibitory control. Results should only be interpreted by qualified professionals.

### **RATIONALE**

Psychological testing has proven to be beneficial in a variety of ways. The objective information that is produced is helpful in accurately diagnosing the nature of a patient's problem, but also in developing recommendations and strategies to address the problem.

Psychological testing beyond a standard parent interview and direct structured behavioral observation is rarely needed for diagnosing autism, according to the practice parameter for the assessment and treatment of children and adolescents with autism spectrum disorder from the American Academy of Child & Adolescent Psychiatry.

Patients who have complex medical conditions or who are contemplating a complex surgical procedure such as bariatric surgery may require a psychological/psychiatric evaluation to determine an underlying psychopathology that could hinder treatment plans. A standard psychiatric evaluation provides a sufficient assessment in many instances, without the need for the complete test battery involved in psychological testing. The pre-surgical evaluation process is designed to optimize surgical outcomes and implement interventions that can address disordered eating, severe uncontrolled mental illness, or active substance abuse. A multidisciplinary team can help assess and manage the patient's modifiable risk factors with a goal of reducing risk of perioperative complications and improving outcomes; the decision for surgical readiness should be primarily determined by the surgeon (Eisenberg et al., 2023).

In general, attention deficit disorders are best diagnosed using structured diagnostic interviews, involving a careful history including whenever possible, collateral information. Dimensionally based rating scales may be used as an adjunct.

The American Academy of Pediatrics (AAP) published updated clinical practice guidelines for the diagnosis, evaluation, and treatment of ADHD in children and adolescents (Wolraich et al., 2019) that state compared to clinical interviews, standardized psychological tests, such as computerized attention tests, have not been found to reliably differentiate between youth with and without ADHD. Appropriate further assessment is indicated if an underlying etiology is suspected.

According to a guidance from National Institute for Health and Care Excellence (NICE, 2019), a diagnosis of ADHD should only be made by a specialist psychiatrist, pediatrician or other appropriately qualified healthcare professional with training and expertise in the diagnosis of ADHD, on the basis of a full clinical and psychosocial assessment that should include discussion about behavior and symptoms in the different domains and settings of the person's everyday life, a full

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developmental and psychiatric history, and observer reports and assessment of the person's mental state. Rating scales are valuable adjuncts, and observations (e.g., at school) are useful when there is doubt about symptoms.

**CODES**

- *Eligibility for reimbursement is based upon the benefits set forth in the member's subscriber contract.*
- ***CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.***
- *Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.*
- *Code Key: Experimental/Investigational = (E/I), Not medically necessary/ appropriate = (NMN)*

**CPT Codes**

<b>Code</b>	<b>Description</b>
96130	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
96131	each additional hour (List separately in addition to code for primary procedure)
96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health professional, two or more tests, any method; first 30 minutes
96137	each additional 30 minutes (List separately in addition to code for primary procedure)
96138	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
96139	each additional 30 minutes (List separately in addition to code for primary procedure)
96146	Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only

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**HCPCS Codes**

<b>Code</b>	<b>Description</b>
No code	

**REVENUE**

<b>Code</b>	<b>Description</b>
918	Psychiatric/Psychological Services-Testing

**ICD10 Codes**

<b>Code</b>	<b>Description</b>
	Multiple diagnosis codes

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\*Key Article

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**KEY WORDS**

Psychological testing.

**CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS**

There is currently a Local Coverage Determination (LCD) for Psychiatry and Psychological Services (L33632). Please refer to the following LCD website for Medicare Members: [[https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=33632&ver=76&CtrctrSelected=298\\*1&Ctrctr=298&name=National+Government+Services%2c+Inc.+\(13201%2c+A+and+B+and+HHH+MAC%2c+J+-+K\)&s=All&DocType=Active&bc=AggAAAOBIAAA&](https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=33632&ver=76&CtrctrSelected=298*1&Ctrctr=298&name=National+Government+Services%2c+Inc.+(13201%2c+A+and+B+and+HHH+MAC%2c+J+-+K)&s=All&DocType=Active&bc=AggAAAOBIAAA&)] accessed 10/11/23.