

2.60 OUTPATIENT SERVICES

2.604 Psychological/Neuropsychological Testing (Adult)

Description of Services: Psychological testing involves the culturally and linguistically competent administration and interpretation of standardized tests to assess an individual's psychological or cognitive functioning. **All testing must be precertified** (please see and use the *Psychological/Neuropsychological Testing* form, following the criteria for Psychological Testing for Children/Adolescents) **except when it is included in the negotiated per diem rate for a facility or program, or when subject to account-specific arrangements.** Testing is virtually never needed on an emergency basis and, thus, requests for it can be reviewed and approved before it is begun.

Testing is viewed as a potentially helpful second opinion for treatment failures and/or difficult to diagnose cases; routine testing (sometimes requested by facilities for admission or regularly provided upon commencement of treatment) is not considered medically necessary. Licensure and credentialing requirements specific to facilities and individual practitioners do apply and are found in our provider manual/credentialing information.

Although all testing approval is subject to the general **admission** and **exclusion criteria** delineated below, the following are guidelines regarding the most common testing issues:

- Testing is approved only for licensed psychologists and other clinicians for whom testing falls within the scope of their clinical license and who have specialized training in psychological and/or neuropsychological testing.
- **Educational testing** is not a covered benefit, though this disqualifier is subject to account-specific arrangements. Assessment of possible learning disabilities, developmental disabilities or autism spectrum disorders is provided by the school system per federal mandate PL 94-142.
- When **neuropsychological testing** is requested secondary to a **clear, documented neurological injury** or other medical/neurological condition (e.g., stroke, traumatic brain injury, multiple sclerosis), ValueOptions may consider this service to be the responsibility of the medical carrier, though this determination may be subject to account-specific guidelines. ValueOptions may request that a neurology consult be done prior to making a medical necessity determination. In the case where **neuropsychological testing** is requested to **differentiate the presence of organic brain dysfunction** versus a psychological disorder, a screening of no more than four (4) hours of testing may be precertified for this purpose. A neurological consult may be requested prior to a certification decision for a complete testing battery. Neuropsychological testing is certified only to a fully-licensed psychologist with appropriate training and expertise in this area. When administration of neuropsychological testing is delegated to a psychometrician/psychological assistant, the report must be signed by the fully-licensed neuropsychologist who is responsible for the interpretation of test results.
- All tasks involving **projective testing** must be performed by a licensed psychologist. Other licensed clinicians who have specialized training in projective testing and whose state licensure permits such testing may also be authorized to perform projective testing.
- The expectation is that the diagnosis of ADHD can in most instances be made on the basis of DSM-IV-TR (or most current DSM) criteria alone and such diagnosis does not necessarily require psychological testing. Extended testing for **ADHD** is not authorized prior to the provision of a thorough evaluation, which has included developmental history of symptoms and administration of rating scales. (Collection of rating scale data from additional objective sources is highly preferred). One unit of 90801 and one or more units of 96101 is usually authorized for this purpose. In the vast majority of cases, the diagnostic question is answered with this work-up. If this initial work-up shows indications for ADHD, referral to a physician would be appropriate.
- Testing requested by the legal or school system is not generally a covered benefit.

- The administration of a **standard battery** of tests is not routinely considered medically necessary; thus, the "process method" of selecting specific tests, which are directly responsive to the referral questions, and presenting problems is generally endorsed by ValueOptions. A standard battery is one that is either given to all patients regardless of diagnostic question, or a battery of tests given, for example, to all new patients. Frequently, a portion of a testing request may be approved as a screening to determine the need for further testing, just as an x-ray might be approved before an MRI in an orthopedic work-up.
- Testing requested on an **inpatient basis** should be completed within 48 hours of being ordered.
- ValueOptions expects brief written reports focused on the admission criteria for establishment of diagnosis and recommendations for changes in unsuccessful treatment plans. While there may be other potential uses for test results, these are outside of the scope of acute-care benefit coverage. Examples of report content generally neither required nor expected by ValueOptions would include: extended discussion of personality dynamics, discussion of cognitive and intellectual strengths and weaknesses, extended discussion of problems related to the interpretation of test results, and discussion of issues outside the scope of benefit coverage (e.g., educational, medical, legal or vocational issues).
- **Payment for testing** is calculated by the hours required for particular tests. The time certified includes administration; scoring, interpretation and a brief written report. The times allowed are based on information from test manufacturers and ValueOptions' panel of consultant psychologists. It is expected certain tests will be scored by computer, so that any additional time for hand scoring will not be certified. One hour maximum is approved for a series of checklists or self-report measures. (See the **List of Psychological Tests** following the criteria for Psychological Testing for Children/Adolescents for details on reimbursement times).

Criteria	
Admission Criteria	<p><i>Either 1 or 2 are necessary for admission:</i></p> <ol style="list-style-type: none"> 1. Testing is needed for a differential diagnosis of a covered mental health condition, which is not clear from a traditional assessment (i.e., clinical interview, and brief rating scales), and diagnostic clarity is needed for effective psychotherapy or psychopharmacotherapy treatment planning. 2. The individual has not responded to standard treatment with no clear explanation of treatment failure, and testing will have a timely effect on the individual treatment plan.
Psychosocial, Occupational, and Cultural and Linguistic Factors	<p><i>These factors, as detailed in the Introduction, may change the risk assessment and should be considered when making level of care decisions.</i></p>
Exclusion Criteria	<ol style="list-style-type: none"> 1. Testing was administered within the last year, and there is no strong evidence that the patient's situation or functioning is significantly different. 2. Testing is primarily for educational purposes. 3. Testing is requested within 30 days of active substance abuse. 4. Testing is primarily to guide the titration of medication. 5. Testing is primarily for legal purposes. 6. Testing is primarily for medical guidance, cognitive rehabilitation, or vocational guidance, as opposed to the admission criteria purposes stated above. 7. Testing request appears more routine than medically necessary (e.g., a standard test battery administered to all new patients).

	<ol style="list-style-type: none"> 8. Specialized training by provider is not demonstrated. 9. Interpretation and supervision of neuropsychological testing (excluding the administration of tests) is performed by someone <i>other than</i> a licensed psychologist or other clinician whom neuropsychological testing falls within the scope of their clinical license, and who has had specialized in neuropsychological testing. 10. Measures proposed have no standardized norms or documented validity. 11. The time requested for a test/test battery falls outside ValueOptions' established time parameters. 12. Extended testing for ADHD has been requested prior to provision of a thorough evaluation, which has included a developmental history of symptoms and administration of rating scales. 13. Symptoms of acute psychosis, confusion, disorientation, etc., interfering with proposed testing validity are present. 14. Administration, scoring and/or reporting of projective testing is performed by someone <i>other than</i> a licensed psychologist, or other clinician for whom projective testing falls within the scope of their clinical licensure and who has specialized training in projective testing.
<p>Continued Stay Criteria</p>	<p><i>Does not apply.</i></p>
<p>Discharge Criteria</p>	<p><i>Does not apply.</i></p>