

PSYCHOLOGICAL TESTING
96101, 96110, 96116, 96118

Provider:		Member ID:	
Review Date:		Reviewer Name:	

1.	Does the purpose of the evaluation meet medical necessity criteria? (NOTE: If Question #1 scores a 1.5, then the purpose does not meet medical necessity but the documentation demonstrates medical necessity. If Question #1 scores 0, then all remaining questions score 0.)	3	1.5	0	
2.	Is it clearly documented that the member was present for the evaluation? (NOTE: If question #2 scores a 0, then all remaining questions score 0.)	1	0		
3.	Does the evaluation meet service definition (evaluation by a psychologist including psychological testing with interpretation and report)? (NOTE: If question #3 scores 0, then all remaining questions score 0.)	3	0		
4.	Does the report contain the following: <ul style="list-style-type: none"> • Date of the service • Location of the service • Time spent (start/stop times) • Signature with appropriate credentials (NOTE: if there is no signature with appropriate credentials within 15 days of the start of the service, all remaining questions score 0.)	3	1.5	0	
5.	Is there sufficient testing administered related to the presenting problem?	3	1.5	0	
6.	Were the administered tests/evaluations congruent to the purpose of the evaluation?	3	1.5	0	
7.	Does the report contain the results (scores and category) of the administered tests/evaluations?	3	1.5	0	
8.	Does the report contain the interpretation of the administered tests/evaluations?	3	1.5	0	
9.	Does the report contain the documentation of a mental status exam?	3	1.5	0	
10.	Does the report contain the rendering of the member's diagnosis within the DSM or ICD methodology?	3	2	1	0
11.	Was an analysis of testing interpretations incorporated in the rationale for diagnosis?	3	1.5	0	
12.	Does the report contain recommendations consistent with the findings of the administered tests/evaluations?	3	1.5	0	

Total Score = _____ [possible 34]

BEST PRACTICE QUESTIONS (do not factor into the scoring)

Is the time claimed congruent to the manufacturer's standard times? 1 - YES 0 - NO	Does the documentation indicate that the results of the testing were reviewed with the consumer and/or family when appropriate? 1 - YES 0 - NO
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