

Provider: _____

Service log

Month:

Day	Client Name	Payment amount	Check #, cash, chg	Procedure Codes	DX

PROCEDURE	CODE	PROCEDURE	CODE
Initial evaluation	90791	Psychological testing; by PhD; per hour	96101
30 min session	90832	Psychological testing; by tech; per hour	96102
45 min session	90834	Psychological testing; by computer; per hour	96103
60 min session	90837	Assessment of Aphasia	96105
Interactive complexity add on code	90785	Neurobehavioral status exam per hour by PhD	96116
Psychotherapy for patient in crisis	90839	Neurophysiological testing per hour by PhD	96118
+ 30 min add on code for 90839	90840	Neurophysiological testing per hour by tech	96119
Family therapy with pt present	90847	Neurophysiological testing per hour by computer	96120
Family therapy without pt present	90846	Developmental screening	96110
Multi Family Group Treatment	90849	Developmental testing	96111
Group therapy	90853		
Did not keep appt – Chargeable	DNKA	Cancel – Do not charge	CANCEL