



## Employee Assistance Program

**EAP Claims must include an HJ modifier following the CPT code to be processed and paid correctly.**

While EAP claims are paid at the same contracted rates as routine outpatient therapy services, EAP claims must include an HJ modifier following the CPT code to be processed and paid correctly. As claims require a diagnosis code, please include an appropriate ICD10 Dx code (e.g., “Z” code). When billing on [providerexpress.com](https://providerexpress.com), providers will be prompted to select BH or EAP. When selecting EAP, the HJ modifier will automatically populate. If the services are provided virtually, (i.e., via telephonically or by video conference) the 02 Place of Service code must also be included on the claim. Visit [Provider Express](https://Provider Express) for more information.

### Optum allows the following EAP procedure codes

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**90832HJ** - 30-37 min individual therapy

**90834HJ** - 38-52 min individual therapy

**90846HJ** - Family therapy without the patient in attendance

**90847HJ** - Family therapy with the patient in attendance

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**90853HJ** - Group therapy other than family

Extended therapy visits (90837) and formal diagnostic assessments (90791) are not covered for EAP.

Unlike other payors, Optum reimburses you at the same rates for EAP services as your contracted routine outpatient service rate.