

Social Human Services Programs Review: Managed Care Minimum Fee Schedule**Behavioral Health (BH)**

Service Category	Procedure Code	Procedure Code Description	Mod 1	Mod 2	Mod 3	Mod 4	Rate
Behavioral Health Services	90785	Interactive complexity					\$ 4.13
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services	AJ				\$ 131.75
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services	HF				\$ 128.04
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services	HO				\$ 136.85
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services					\$ 197.01
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services	95				\$ 197.01
Behavioral Health Services	90791	Psychiatric diagnostic evaluation without medical services	CR				\$ 197.01
Behavioral Health Services	90792	Psychiatric diagnostic evaluation with medical services	TD	TF			\$ 227.57
Behavioral Health Services	90792	Psychiatric diagnostic evaluation with medical services					\$ 370.89
Behavioral Health Services	90792	Psychiatric diagnostic evaluation with medical services	95				\$ 370.89
Behavioral Health Services	90792	Psychiatric diagnostic evaluation with medical services	CR				\$ 370.89
Behavioral Health Services	90832	Psychotherapy, 30 minutes with patient and/or family member	AJ				\$ 58.30
Behavioral Health Services	90832	Psychotherapy, 30 minutes with patient and/or family member	HF				\$ 53.35
Behavioral Health Services	90832	Psychotherapy, 30 minutes with patient and/or family member	HO				\$ 58.30
Behavioral Health Services	90832	Psychotherapy, 30 minutes with patient and/or family member					\$ 67.84
Behavioral Health Services	90833	Psychotherapy, 30 minutes with patient and/or family member when	TD	TF			\$ 51.34
Behavioral Health Services	90833	Psychotherapy, 30 minutes with patient and/or family member when					\$ 57.51
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member	AJ				\$ 80.51
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member	HF				\$ 80.03
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member	HO				\$ 85.44
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member					\$ 101.75
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member	95				\$ 101.75
Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member	GT				\$ 101.75
Behavioral Health Services	90836	Psychotherapy, 45 minutes with patient and/or family member when	TD	TF			\$ 53.68
Behavioral Health Services	90836	Psychotherapy, 45 minutes with patient and/or family member when					\$ 58.37
Behavioral Health Services	90837	Psychotherapy, 60 minutes with patient and/or family member	AJ				\$ 116.60
Behavioral Health Services	90837	Psychotherapy, 60 minutes with patient and/or family member	HF				\$ 106.70
Behavioral Health Services	90837	Psychotherapy, 60 minutes with patient and/or family member	HO				\$ 116.60
Behavioral Health Services	90837	Psychotherapy, 60 minutes with patient and/or family member					\$ 135.68
Behavioral Health Services	90838	Psychotherapy, 60 minutes with patient and/or family member when	TD	TF			\$ 94.03
Behavioral Health Services	90838	Psychotherapy, 60 minutes with patient and/or family member when					\$ 110.62
Behavioral Health Services	90846	Family psychotherapy (without the patient present)					\$ 140.07

Behavioral Health Services	90846	Family psychotherapy (without the patient present)	95		\$ 140.07
Behavioral Health Services	90846	Family psychotherapy (without the patient present)	AJ		\$ 97.16
Behavioral Health Services	90846	Family psychotherapy (without the patient present)	CR		\$ 140.07
Behavioral Health Services	90846	Family psychotherapy (without the patient present)	HF		\$ 128.82
Behavioral Health Services	90846	Family psychotherapy (without the patient present)	HO		\$ 128.82
Behavioral Health Services	90846	Family psychotherapy (without the patient present)	TD	TF	\$ 128.82
Behavioral Health Services	90847	Family psychotherapy (conjoint psychotherapy) (with patient presen	AJ		\$ 89.46
Behavioral Health Services	90847	Family psychotherapy (conjoint psychotherapy) (with patient presen	HF		\$ 89.46
Behavioral Health Services	90847	Family psychotherapy (conjoint psychotherapy) (with patient presen	HO		\$ 89.46
Behavioral Health Services	90847	Family psychotherapy (conjoint psychotherapy) (with patient presen	TD	TF	\$ 128.82
Behavioral Health Services	90847	Family psychotherapy (conjoint psychotherapy) (with patient presen			\$ 120.90
Behavioral Health Services	90849	Multiple family group psytx	AJ		\$ 28.34
Behavioral Health Services	90849	Multiple family group psytx	HF		\$ 25.94
Behavioral Health Services	90849	Multiple family group psytx	HO		\$ 28.34
Behavioral Health Services	90849	Multiple family group psytx	TD	TF	\$ 31.07
Behavioral Health Services	90849	Multiple family group psytx			\$ 38.57
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)	AJ		\$ 37.34
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)	HF		\$ 34.13
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)	HO		\$ 37.34
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)	TD	TF	\$ 37.34
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)			\$ 60.45
Behavioral Health Services	90853	Group psychotherapy (other than of a multiple-family group)	59		\$ 60.45
Behavioral Health Services	90863	Pharmacologic mgmt w/psytx			\$ 22.31
Behavioral Health Services	92507	Treatment of speech, language, voice, communication, and/or audito			\$ 46.21
Behavioral Health Services	92507	Treatment of speech, language, voice, communication, and/or audito	CR		\$ 46.21
Behavioral Health Services	92507	Treatment of speech, language, voice, communication, and/or audito	GT		\$ 46.21
Behavioral Health Services	92508	Treatment of speech, language, voice, communication, and/or audito			\$ 27.85
Behavioral Health Services	92508	Treatment of speech, language, voice, communication, and/or audito	GN		\$ 27.85
Behavioral Health Services	92521	Evaluation of speech fluency			\$ 92.82
Behavioral Health Services	92522	Evaluation of speech and sound production			\$ 109.95
Behavioral Health Services	92523	Evaluation of speech sound production with evaluation of language c			\$ 156.54
Behavioral Health Services	92524	Behavioral quality analysis voice			\$ 78.57
Behavioral Health Services	92557	Comprehensive audiometry threshold evaluation and speech recogni			\$ 50.50
Behavioral Health Services	92557	Comprehensive audiometry threshold evaluation and speech recogni	52		\$ 27.45
Behavioral Health Services	92557	Comprehensive audiometry threshold evaluation and speech recogni	WJ		\$ 50.50

Behavioral Health Services	96130	Psychological testing evaluation by qualified healthcare professional		\$	88.73
Behavioral Health Services	96131	Psychological testing evaluation by qualified health care professiona		\$	67.50
Behavioral Health Services	96132	Neuropsychological testing evaluation by qualified health care profe		\$	99.75
Behavioral Health Services	96133	Neuropsychological testing evaluation by qualified health care profe		\$	75.71
Behavioral Health Services	96136	Psychological or neuropsychological test administration and scoring		\$	35.58
Behavioral Health Services	96137	Psychological or neuropsychological test administration and scoring		\$	32.91
Behavioral Health Services	96138	Psychological or neuropsychological test administration and scoring		\$	28.89
Behavioral Health Services	96139	Psychological or neuropsychological test administration and scoring		\$	28.89
Behavioral Health Services	96146	Psychological or neuropsychological test administration and automa		\$	1.62
Behavioral Health Services	97110	Therapeutic procedure, one or more areas, each 15 minutes therapeu		\$	24.58
Behavioral Health Services	97110	Therapeutic procedure, one or more areas, each 15 minutes therapeu	GO	\$	24.58
Behavioral Health Services	97110	Therapeutic procedure, one or more areas, each 15 minutes therapeu	GP	\$	24.58
Behavioral Health Services	97110	Therapeutic procedure, one or more areas, each 15 minutes therapeu	XU	\$	24.58
Behavioral Health Services	97150	Therapeutic procedure(s), group (2 or more individuals)		\$	17.96
Behavioral Health Services	97150	Therapeutic procedure(s), group (2 or more individuals)	GP	\$	17.96
Behavioral Health Services	97161	Evaluation of physical therapy, typically 20 minutes		\$	105.04
Behavioral Health Services	97161	Evaluation of physical therapy, typically 20 minutes	GP	\$	105.04
Behavioral Health Services	97162	Evaluation of physical therapy, typically 30 minutes		\$	105.04
Behavioral Health Services	97162	Evaluation of physical therapy, typically 30 minutes	GP	\$	105.04
Behavioral Health Services	97163	Evaluation of physical therapy, typically 45 minutes		\$	105.04
Behavioral Health Services	97163	Evaluation of physical therapy, typically 45 minutes	GP	\$	105.04
Behavioral Health Services	97164	Re-evaluation of physical therapy, typically 20 minutes		\$	105.04
Behavioral Health Services	97164	Re-evaluation of physical therapy, typically 20 minutes	GP	\$	105.04
Behavioral Health Services	97165	Evaluation of occupational therapy, typically 30 minutes		\$	105.04
Behavioral Health Services	97166	Evaluation of occupational therapy, typically 45 minutes		\$	105.04
Behavioral Health Services	97167	Evaluation of occupational therapy, established plan of care, typicall		\$	105.04
Behavioral Health Services	97168	Re-evaluation of occupational therapy, established plan of care, typi		\$	105.04
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15		\$	29.05
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15	59	\$	29.05
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15	CR	\$	29.05
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15	GO	\$	29.05
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15	GP	\$	29.05
Behavioral Health Services	97530	Therapeutic activities, direct patient contact by the provider, each 15	XU	\$	29.05
Behavioral Health Services	99484	Care management services for behavioral health conditions, at least .		\$	36.96
Behavioral Health Services	H0046	Mental health services, not otherwise specified		\$	42.05

Behavioral Health Services	H2001	Rehabilitation program, per 1/2 day		\$	356.17
Behavioral Health Services	H2001	Rehabilitation program, per 1/2 day	TG	\$	356.17
Behavioral Health Services	H2011	Crisis intervention service, per 15 minutes		\$	34.71

Children's Services							
Service Category	Procedure Code	Procedure Code Description	Mod 1	Mod 2	Mod 3	Mod 4	Rate
Children's services	0154	Bradley Hospital CRAFT services					\$ 704.34
Children's services	99501	Home visit for postnatal assessment and follow-up care					\$ 468.94
Children's services	99501	Home visit for postnatal assessment and follow-up care	HD				\$ 468.94
Children's services	99502	Parental visit, home visit for newborn care and assessment					\$ 54.58
Children's services	99502	Parental visit, home visit for newborn care and assessment	AJ				\$ 88.76
Children's services	99502	Parental visit, home visit for newborn care and assessment	AJ	HA			\$ 88.76
Children's services	99502	Parental visit, home visit for newborn care and assessment	HA				\$ 54.58
Children's services	99502	Parental visit, home visit for newborn care and assessment	TD				\$ 85.48
Children's services	99502	Parental visit, home visit for newborn care and assessment	TD	HA			\$ 85.48
Children's services	99600	Unlisted home visit service or procedure					\$ 73.54
Children's services	99600	Unlisted home visit service or procedure	HD				\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	HD				\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	HD	U4			\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	HD	U4			\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	U3				\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	U3	U4			\$ 54.54
Children's services	99600	Unlisted home visit service or procedure	U4				\$ 73.54
Children's services	H1000	Prenatal intake, at-risk assessment					\$ 468.94
Children's services	H1000	Prenatal intake, at-risk assessment	HD				\$ 468.94
Children's Services	92507	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNIC.	GN				\$ 46.21
Children's Services	92521	EVALUATION OF SPEECH FLUENCY	GN				\$ 92.82
Children's Services	92522	EVALUATION OF SPEECH AND SOUND PRODUCTION	GN				\$ 109.95
Children's Services	92523	EVALUATION OF SPEECH SOUND PRODUCTION WITH EVA	GN				\$ 156.54
Children's Services	92524	BEHAVIORAL AND QUALITATIVE ANALYSIS OF VOICE AN	GN				\$ 78.57
Children's Services	97162	EVALUATION OF PHYSICAL THERAPY, TYPICALLY 30 MIN	GO				\$ 105.04
Children's Services	97164	RE-EVALUATION OF PHYSICAL THERAPY, TYPICALLY 20 I	GO				\$ 105.04
Children's Services	97165	EVALUATION OF OCCUPATIONAL THERAPY, TYPICALLY 3	GO				\$ 105.04
Children's Services	97166	EVALUATION OF OCCUPATIONAL THERAPY, TYPICALLY 4	GO				\$ 105.04
Children's Services	97167	EVALUATION OF OCCUPATIONAL THERAPY, ESTABLISHE	GO				\$ 105.04

Children's Services	97168	RE-EVALUATION OF OCCUPATIONAL THERAPY, ESTABLIS	GO		\$	105.04
Children's Services	97150	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVI	GO		\$	17.96
Children's Services	99502	PARENTAL VISIT, HOME VISIT FOR NEWBORN CARE AND	HD		\$	54.58
Children's Services	99502	PARENTAL VISIT, HOME VISIT FOR NEWBORN CARE AND	HD	U4	\$	54.58
Children's Services	99502	PARENTAL VISIT, HOME VISIT FOR NEWBORN CARE AND	U3		\$	54.58
Children's Services	99502	PARENTAL VISIT, HOME VISIT FOR NEWBORN CARE AND	U3	U4	\$	54.58

Home and Community-based Services (HCBS)							
Service Category	Procedure Code	Procedure Code Description	Mod 1	Mod 2	Mod 3	Mod 4	Rate
HCBS	G0151	Services of a physical therapist in home health or hospice settings, ea					\$ 44.27
HCBS	G0152	Services of an occupational therapist in home health or hospice settir					\$ 44.27
HCBS	G0153	Services of a speech and language pathologist in home health or hosj					\$ 44.27
HCBS	G0155	HHCP-svs of csw,ea 15 min					\$ 18.36
HCBS	G0156	Services of home health/hospice aide in home health or hospice setti					\$ 24.08
HCBS	G0299	Hhs/hospice of rn ea 15 min					\$ 18.36
HCBS	H0044	Supported housing, per month					\$ 406.74
HCBS	H0044	Supported housing, per month	U1				\$ 406.74
HCBS	S5102	Day care services, adult; per diem					\$ 42.43
HCBS	S5102	Day care services, adult; per diem	U1				\$ 61.93
HCBS	S5102	Day care services, adult; per diem	U1	U2			\$ 123.86
HCBS	S5102	Day care services, adult; per diem	U2				\$ 84.87
HCBS	T1016	Case management, each 15 minutes					\$ 23.90
HCBS	T1017	Targeted case management, each 15 minutes					\$ 23.90
HCBS	T1028	Assessment of home, physical and family environment, to determine					\$ 90.76
HCBS	T2042	Hospice routine home care					\$ 283.14
HCBS	T2043	Hospice continuous home care; per hour					\$ 73.44
HCBS	T2044	Hospice respite care					\$ 594.73
HCBS	T2045	Hospice general care					\$ 1,274.15
HCBS	X0043	Home health nursing and therapy visits					\$ 177.08
HCBS	X0620	Non-medical case management - services for blind & visually impai					\$ 28.00