Public																		
									PRP/RR									
Procedure	E&M	Service Description																
			MD	MD/NPP	NPP	PHD	LCSW,	OMHC								Freestandin		Resident.
			non-facility	facility		Psych	RN Ther,		On-Site	Off-Site	On/Off Site	FQHC	СМ	Mobile Tx	Brain	Part. Hosp.	<b>F</b> 114	Crisis
				POS			LCPC								Injury	Program	Facility	Facility
				21,22,31,32, 51,52														
	FERSIONA	L SERVICES FOR IOP, PHP & CRS		51,52														
90791		Psychiatric diagnostic evaluation	151.68	I	106.01	121.08	106.01	170.32	1									
90791		C&A Psychiatric diagnostic evaluation	151.68		106.01	121.08	106.01	190.23										
90792		Psychiatric diagnostic evaluation with medical services	151.68		106.01			170.32										
90792		C&A Psychiatric diagnostic evaluation with medical services	151.68		106.01			190.23										
99201		Evaluation and Management, including Rx -Minimal, new patient	45.67	27.61	45.67			45.67										
99202		Evaluation and Management, including Rx -Straight forward, new patient	78.32	52.58	78.32			78.32										
99203		Evaluation and Management, including Rx -Low complexity, new patient	113.59	80.17	113.59			113.59										
99204		Evaluation and Management, including Rx -Moderately complex, new patient	171.10	407.00	474.40			474.40										
99204 99205		Evaluation and Management, including Rx -Highly complex, new patient	174.10 216.65	137.23 177.09	174.10 216.65			174.10 216.65										
99203 99211		Evaluation and Management, including Rx -Highly complex, new patient Evaluation and Management, including Rx -Minimal	210.03	9.68	210.03			210.03										
99212		Evaluation and Management, including Rx -Straight forward	46.05	26.46	46.05			46.05										
99213		Evaluation and Management, including Rx -Low complexity	76.72	53.67	76.72			76.72										
99214		Evaluation and Management, including Rx -Moderately complex	113.09	82.36	113.09			113.09										
99215		Evaluation and Management, including Rx -Highly complex	151.24	115.90	151.24			151.24										
90832		Individual psychotherapy (30 min) MD Only	43.78		43.78			43.78										
90834		Individual psychotherapy (45 min) MD Only	82.30		82.30			82.30										
OUTPATIEN 90791		PROFESSIONAL SERVICES Psychiatric diagnostic evaluation	151.68		106.01	121.08	106.01	170.32										
90791 90791		C&A Psychiatric diagnostic evaluation	151.68		106.01	121.08	106.01	170.32										
90792		Psychiatric diagnostic evaluation with medical services	151.68		106.01	121.00	100.01	170.32										
90792		C&A Psychiatric diagnostic evaluation with medical services	151.68		106.01			190.23										
90832		Individual psychotherapy (30 min)-Outpatient	50.05		34.98	40.09	34.98	50.05										
90832		C&A Individual psychotherapy (30 min)-Outpatient	50.05		34.98	40.09	34.98	59.19										
90833	Y	30 min Psychotherapy add on	\$50.05		34.98			50.05										
90833	Y	C&A 30 min Psychotherapy add on	\$50.05		34.98			59.19										
90834		Individual psychotherapy (45 min)-Outpatient	90.94		63.77	72.65	63.77	90.94										
90834 90836	V	C&A Individual psychotherapy (45 min)-Outpatient	90.94 \$90.94		63.77 63.77	72.65	63.77	105.20 90.94										
90836		45 min Psychotherapy add on C&A 45 min Psychotherapy add on	\$90.94		63.77			105.20										
90837		Individual psychotherapy (60 min)	φ00.04		00.11			90.94										
90837		C&A Individual psychotherapy (60 min)						105.20										
90838		60 min Psychotherapy add on						90.94										
90838	Y	C&A 60 min Psychotherapy add on						105.20										
90839		Psychotherapy for crisis, first 60 min						100.10										
90839		C&A Psychotherapy for crisis, first 60 min						118.37										
90840 90840		Psychotherapy for crisisadditional 30 min						54.16 61.77										
90840 90846		C&A Psychotherapy for crisis additional 30 min Family psychotherapy without patient present	85.02		53.81	69.96	53.81	90.14										
90846		C&A Family psychotherapy without patient present	85.02		53.81	69.96	53.81	104.13										
90847		Family psychotherapy with patient present (45-60 min)	94.71		65.64	76.41	65.64	94.71										
90847		C&A Fam psychoth with patient present (45-60 min)	94.71		65.64	76.41	65.64	107.62										
90847-52		C&A Family psychotherapy with patient presentAbbrev	58.65		41.17	46.82	41.17	58.65										
90849		Multiple family group psychotherapy 45 - 60 minutes						39.83										
90849		C&A Multiple family group psychotherapy 45 - 60 minutes						41.98										
90849-52		Multiple family group psychotherapyAbbrev					ļ	35.75										
90849-52 H2027		C&A Multiple family group psychotherapyAbbrev Family psycho-education with consumer present						38.55 53.81										
12021		Family psycho-education with consumer present						53.81					-				-	
90853		Group psychotherapy (not multi-family.) 45-60 minutes	24.75		24.75	24.75	24.75	38.74										
90853		C&A Group psychotherapy (not multi-family.) 45-60 minutes.	24.75		24.75	24.75	24.75	40.90										
90853-21		Group psychotherapy prolonged (More than 75 minutes)						50.58										
90853-21		C&A Group psychotherapy prolonged (More than 75 minutes)						50.58										
99201		Evaluation and Management, including Rx -Minimal, new patient	45.67	27.61	45.67			45.67										
99201		C & A Evaluation and Management, including Rx -Minimal, new patient	45.67	27.61	45.67			45.67										
99202		Evaluation and Management, including Rx -Straight forward, new patient	78.32	52.58	78.32			78.32	ļ		ļ							
99202		C & A Evaluation and Management, including Rx -Straight forward, new patient	78.32	52.58	78.32			78.32										
99202 99203		patient Evaluation and Management, including Rx -Low complexity, new patient	113.59	52.58 80.17	113.59			113.59										
		C & A Evaluation and Management, including Rx -Low complexity, new patient	. 10.00	00.17				. 10.03										
99203			113.59	80.17	113.59			113.59										
		Evaluation and Management, including Rx -Moderately complex, new patient																
			174.10	137.23	174.10			174.10										
99204		C & A Evaluation and Management, including Rx -Moderately complex, new																

C         C         A. Flag downlaw, North	99205		Evaluation and Management, including Rx -Highly complex, new patient	216.65	177.09	216.65			216.65	r	r					r			
Set 0         -        -         -         -	99203			210.05	177.09	210.05			210.03										
Bit Monte Service Servi	99205		o a A Evaluation and Management, including tx - highly complex, new patient	216.65	177.09	216.65			216.65										
Biole     Calacia or Manyaeee national fragmented     460     450     4	99211		Evaluation and Management, including Rx -Minimal	21.21	9.68	21.21			21.21										
BAIP	99211		C&A Evaluation and Management, including Rx -Minimal			21.21			21.21										
Bit Sin																			
B311     B31     B32     B32     B32     B32     B32     B32     B33     B33<																			
Bitti     Decision of allog																			
Bit1       CAL Space and Maxee and																			
Obtaine of biologness inductor inductor origin     Six i																			
CALCURGENCY																			
SomeS										1									
South         South <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td>40.09</td><td>34.98</td><td>50.05</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>							40.09	34.98	50.05										
BOM     Declarge QRAP     Image QRAP	90876		Indiv psychophysio therapy incl biofdbk (45-50 min)	90.94		63.77	72.65	63.77	90.94										
Bit O       mpch basks per hark, PR.D. Le Assama. In one per knows       image       Photo Park Per Ver D	90889		Discharge OMS (HCFA)						21.53										
Bit Qi     micro consult in the product of the product	0929		Discharge OMS (UB)															\$21.53	
Bit I       Orde consultations and under set with y marked in a model of a set with y marked in y ma																			
Big24       Other Groundor. and outed fields are field							27.55		27.55										
9843     Other Original or solve diger MAP or Prepare     1948 <td></td>																			
max     Max </td <td></td>																			
Bits open is an end water of any and one of any and one of any and one of any		┝──┨									<u> </u>								
cm/s											l		<b> </b>						
10004     Rath additional 30 minutes of a protonged phy see     1     <	99245			237.54	202.19	237.54													
000	99354		Prolonged phy svc req face-to-face pat contact beyond the usual service						104.57										
99211Inter Index or 30m in Monyi102.1102.2102.1102.2102.1102.2102.1102.2102.1102.2102.1102.2102.1102.1102.2102.1	99355		Each additional 30 minutes of a prolonged phy svc						102.26										
98221CAA Make hoping Loare (5 min) (M2 only)1102.110	INPATIENT H	HOSPITAL	SERVICES																
general of and solubil canding of and solubil candi	99221		Initial hospital care (30 min) (MD only)	106.21	106.21	106.21													
spaceIntel Match Maphel rate (20 mi) (00 mi)144.23144.23144.24	99221		C&A Initial hospital care (30 min) (MD only)	106.21	106.21	106.21													
9223       nulai hopalai acar (70 mi) M0 only       97124       97124       27124	99222		Initial hospital care (50 min) (MD only)																
92231       CAA halal hospital care (70 mm) (M0 only)       212.42       212.42       212.42       212.42       1	99222		C&A Initial hospital care (50 min) (MD only)	144.23	144.23	144.23													
98211       Stateguart Ports (5 m) (MD only)       140.97       40.97       0.97       0	99223		Initial hospital care (70 min) (MD only)	212.42	212.42	212.42													
98231       CAA Subsequent P care (5 min) (MD only)       40.97       40.97       40.97       10 </td <td>99223</td> <td></td> <td>C&amp;A Initial hospital care (70 min) (MD only)</td> <td>212.42</td> <td>212.42</td> <td>212.42</td> <td></td>	99223		C&A Initial hospital care (70 min) (MD only)	212.42	212.42	212.42													
99232       Subacquent Pare (Sm) (MD only)       75,25       75,25       72,25       N <t< td=""><td>99231</td><td></td><td>Subsequent IP care (15 min) (MD only)</td><td>40.97</td><td>40.97</td><td>40.97</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	99231		Subsequent IP care (15 min) (MD only)	40.97	40.97	40.97													
9823CAA Subsequent P card (35 mi) (MD only)75,2572,2572,6888<	99231		C&A Subsequent IP care (15 min) (MD only)	40.97	40.97	40.97													
98233       Image       Subsequent Pare (3 Smin) (MD only)       108.44       108.41       108.41       Image       Image <td>99232</td> <td></td> <td></td> <td>75.25</td> <td>75.25</td> <td>75.25</td> <td></td>	99232			75.25	75.25	75.25													
9923CA Subsequent Pare (35 min) (M0 only)108.41108.4	99232			75.25	75.25	75.25													
90238       Hospital discharge day mgmt (30 min (step) (MD only)       75.82       77.82	99233		Subsequent IP care (35 min) (MD only)	108.41	108.41	108.41													
99238       C&A Hospital discharge day mgmt (30 min (18e) (M) only)       75.82       78.82       78.82       N	99233		C&A Subsequent IP care (35 min) (MD only)	108.41	108.41	108.41													
99239       Hespital discharge day mgmt (-S0 min) (MD only)       112.04       112.04       112.04       I	99238		Hospital discharge day mgmt (30 min or less) (MD only)	75.82	75.82	75.82													
98291       C&A Hospital dischargé day mgm (39 m) (MD only)       112.04				75.82	75.82	75.82													
98251       Initial inpatient consultation (20 min) (MD only)       97,00       51,70       <				112.04	112.04	112.04													
98252       Initial inpatient consultation (40 only)       79.28<				112.04	112.04														
98253       Initial inpatient consultation (55 min) (MD only)       174.62       174.62       I <t< td=""><td>99251</td><td></td><td>Initial inpatient consultation (20 min) (MD only)</td><td>51.70</td><td>51.70</td><td>51.70</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	99251		Initial inpatient consultation (20 min) (MD only)	51.70	51.70	51.70													
98254       Initial ingatient consultation (80 min) (MD only)       174.62       174.62       174.62       174.62       174.62       1				79.28	79.28	79.28													
9225       Initial inpatient consultation (110 min) (MD only)       21106       211.06																			
92281       ER Visit       21.90																			
9282ER Visit43.07 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td><u> </u></td><td></td><td></td><td><u> </u></td><td>l</td><td></td><td><u> </u></td><td></td><td></td><td></td></t<>										<u> </u>			<u> </u>	l		<u> </u>			
99233Image: Sector of the sector										<u> </u>			<u> </u>	l		<u> </u>			
99284Image: Normal Sector112.42<																			
99285II										<u> </u>			<u> </u>	l		<u> </u>			
MISCELLANEOUS       Anesthesia for ECT       98.27       Image: Contract of the cont										<u> </u>			<u> </u>	l		<u> </u>			
Note:Anesthesia for ECT98.27Image: Section of			ER Visit	179.86	179.86	179.86													
9870ECT single seizure // monitoring (Physician only)98.39<																			
Total       Control       Contro       Control       Control													L	l					
1015Clinic visit/encounter, all inclusive rate per dayImage: selection of blood by venipunctureImage: selection of blood by venipuncture90772Image: selection of blood by venipunctureImage: selection of blood by venipu	90870		ECT single seizure w/ monitoring (Physician only)	98.39							ļ		Ind	ļ					
36415Collection of blood by venipunctureImage of the spectral spectr	T1015		Clinic visit/encounter, all inclusive rate per day																
90772Interapeutic injection - Ends 12/31/2008Interapeutic injection - Starts 01/01/2009Interapeutic injection - Star									14.04				Nale				<u> </u>		
96372       Therapeutic injection - Starts 01/01/2009       Image: Constant on the starts 01/01/2009       Image: Constarts 01/01/2009																			
SPECIAL SERVICES       Mental health partial hosp, tx <24 hours       Mental health partial h		┝──┨																	
So201       Mental health partial hosp, tx <24 hours		RVICES							14.94										
S201-52       Intensive outpatient program (IOP)       Image: Constraint of the system of the			Mental health partial hosp, tx <24 hours														\$203.60		
S9480       Intensive OP psych svcs, per diem (clinic model)       Image: second secon																			
S9480       C&A Intensive OP psych svcs, per diem (clinic model)       Image: clinic model       Image: clinic       Image:		┝──┨							120.60		<del> </del>		<del> </del>				φι ΙΟ.03		
H0032 Interdisciplinary team tx plng w/patient present		┝──┨									<del> </del>		<del> </del>						
	H0046		Therapeutic Nursery						42.20										

OCCUPATIO															
97003	NAL THEF	Occupational therapy evaluation, per 15 min			45.07										'
		Occupational therapy evaluation, per 15 min			15.07										'
97004					15.07										
97150		Therapeutic procedure(s) group (2 or more)			18.30										l
97530		Therapeutic activities, direct patient contact, per 15 min.			11.83										J
97532		Development of cognitive skills, direct contact per 15 min.			11.83										ļ
97535		Self-care/home mgmt trng, per 15 min.			11.83										<u> </u>
97537		Community/work reintegration trng, direct contact, per 15 min.			11.83										1
MENTAL HE	ALTH CAS	SE MANAGEMENT													
H0031		Case Management Annual Assessment (only if approved by program)									\$108.61				
T1016		Mental health case management (Daily rate)									\$108.61				Í
MOBILE TR	EATMENT														
H0040-21		Assertive Community Treatment (ACT) EBP										\$1,183.84			
H0040-U9		Assertive Community Treatment (ACT) EBP for Medicare consumers										\$1,049.31			1
H0040		Mobil treatment Non-EBP										\$839.45			(
H0040-52		Mobil treatment Non-EBP for Medicare consumers										\$643.58			
		ILITATION-RESIDENTIAL REHABILITATION PROGRAM										<b>\$043.30</b>			
	IC REHAB						001.00	001.00							
H0002		Rehabilitation Assessment					\$61.62	\$61.62							
H2016		Encounter (only bill w/POS 15 (off-site) or 52 (on-site)													<u> </u>
S9445		Any combination of on/off-site PRP svcs for client in a supported employment program. (Must use POS 52 or 15 & min 2 encounters) (Monthly rate)					\$107.62	\$107.62	\$107.62						
H2018-U2		Any combination of on/off-site PRP svcs for Community client (i.e. child or adult under supv of guardian/parent). (Must use POS 49 & min 3 encounters)													
		(Monthly rate)				I			\$426.99		I		I		i
H2018-U2		On-site PRP svcs only for Community client. (Must use POS 52 & min 2 encounters) (Monthly rate)					\$183.22								
H2018-U2		Off-site PRP svcs only for Community client. (Must use POS 15 & min 2					\$183.2Z								
H2018-U3		encounters) (Monthly rate) Any combination of on/off-site PRP svcs for Supported Living client (i.e. adult						\$243.76							
		living independently). (Must use POS 49 & min 6 encounters) (Monthly rate)							\$760.88						
H2018-U3		On-site PRP svcs only for Supported Living client. (Must use POS 52 & min 3 encounters) (Monthly rate)					\$259.37								l
H2018-U3		Off-site PRP svcs only for Supported Living client. (Must use POS 15 & min 5 encounters) (Monthly rate)						\$501.51							
H2018-U4		On-site PRP svcs only to Adult in General Level RRP bed. (Must use POS 52 & min 4 encounters) (Monthly rate)					<b>•</b> = = •	\$501.51							
H2018-U4		Off-site PRP svcs only to Adult in General Level RRP bed. (Must use POS 15					\$447.70								
H2018-U5		& min 13 encounters) (Monthly rate) On-site PRP svcs only to Adult in Intensive Level RRP bed. (Must use POS						\$1,202.13							
H2016-05		52 & min 4 encounters) (Monthly rate)					\$447.70								
H2018-U5		Off-site PRP svcs only to Adult in Intensive Level RRP bed. (Must use POS 15 & min 19 encounters) (Monthly rate)						\$3,123.17							
H2018-U6		Any combination of on/off-site PRP svcs for adult in General Level RRP bed. (Must use POS 49 & min 17 encounters) (Monthly rate)							\$1,649.83						
H2018-U7		Any combination of on/off-site PRP svcs for adult in Intensivel Level RRP bed. (Must use POS 49 & min 23 encounters) (Monthly rate)													
T1023		Transitional PRP. Any combination of on/off-site PRP services to adult or TAY							\$3,570.87						
11023		consumer transitioning to an RRP or an inpt. Facility. (Must use POS 49 and min 4 encounters for at least 60 min each)							<b>6</b> 4 4 7 7 0						
									\$447.70						
HOUSING S	ERVICES	Regidential room and board (par dou)					040 50							040 -0	
T2048		Residential room and board (per day)		<u> </u>			\$12.59							\$12.59	
S5150	l	Enhanced support (per hour) (10 hour maximum)			 	ļ	\$12.91				ļ	ļ	ļ	 <b>A</b> 46 - 1	
H0019		Crisis Bed hold (per day)					\$12.59							 \$12.59	
RESPITE CA	ARE														
H0045		Adult Respite care, not in home, per diem					\$75.61			ļ			L		l
H0045		C&A Respite care, not in home, per diem												\$174.34	
T1005		In home respite care				\$3.49/ 15min.						\$3.49/ 15min.			
RESIDENTIA	AL CRISIS	SERVICES													
S9485		Residential crisis services (also bill as T2048)													\$252.34
S5145		Residential crisis, treatment foster care		Ī	1					Ī					\$162.25
SUPPORTE		MENT													
H2023		CSA w/lifetime benefit of \$2,750)		1				\$7.40							
		Supported employment (Pre-placement phase) (Auth'd by CSA and has a													
H2024		maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by CSA and has a						\$430.49							
H2024-21		maximum number of 3 units/year)						\$1,075.14							<u> </u>

H2026	Ongoing support to maintain employment, per month					\$349.77					
H2026-21	Ongoing support to maintain employment, per month - EBP					\$430.49					
S9445-52	Clinic coordination - EBP					\$107.62					
TRAUMATIC B											
W0037	Residential habilitation Level 1 (per day)								\$192.76		
W0038	Residential habilitation Level 2 (per day)								\$255.24		
W0039	Residential habilitation Level 3 (per day)								\$353.11		
W0054	Day habilitation Level 1 (per day)								\$49.76		
W0055	Day habilitation Level 2 (per day)								\$86.81		
W0056	Day habilitation Level 3 (per day)								\$122.14		
W0057	Supported employment Level 1 (per day)								\$29.53		
W0058	Supported employment Level 2 (per day)								\$49.76		
W0059	Supported employment Level 3 (per day)								\$122.14		
W0060	Individual Support Services (ISS)								\$24.14		
THERAPEUTIC	BEHAVIORAL SERVICES										
96150	Initial Assessment & Development of Behavioral Plan for TBS (to be billed in 15 minute increments)	\$105.51 (\$26.38/ 15 mins)									
96151	Reassessment and development of new Behavior Plan for TBS (licensed TBS Providers only) (to be billed in 15 minute increments)	\$99.18 (\$24.80/ 15 mins)									
96152	EPSDT Health & behavior intervention (must be a designated provider of Therapeutic Behavioral Services) (to be billed in 15 minute increments)	\$21.56/hr (\$5.39/ 15 minutes)									
* Reimbursable	using POS 12 for follow-up visits by an OMHC M.D. in a Crisis Bed										
** If value of fie	d is 'Y', can charge one E&M Code between 99201 and 99215		 	 	 		 	 			1