Public Menta	al Healt	th System Rates Effective October 1, 2016																
		Somioo Description																
Procedure	E&M	Service Description	MD	MD/NPP	NPP	PHD	LCSW,	омнс							Traumat	Freestandin		Resident
			non-facility	facility	NFF	Psych	RN Ther,	OWINC	On-Site	Off-Site	On/Off Site	FOHC	СМ	Mobile Tx	Brain	Part. Hosp.		Crisis
				POS		. eyen	LCPC		0.1.0.1.0	0.1.0.10			•		Injury	Program	Facility	_
				21,22,31,32,														
				51,52														
OTHER PRO	FESSI	ONAL SERVICES FOR IOP, PHP & CRS														.	•	
90791		Psychiatric diagnostic evaluation	154.71		108.13	125.97	110.29	177.20										
90791		C&A Psychiatric diagnostic evaluation	154.71		108.13	125.97	110.29	197.91										
90792		Psychiatric diagnostic evaluation with medical services	154.71		108.13			177.20										
90792		C&A Psychiatric diagnostic evaluation with medical services	154.71		108.13			197.91										
30732		Evaluation and Management, including Rx -Minimal, new	134.71		100.13			157.51										
99201		patient	44.36	26.64	44.36			44.36										
99202		Evaluation and Management, including Rx -Straight	75.44	50.34	75.44			75.44										
		Evaluation and Management, including Rx -Low complexity,									Î	Î			1			
99203		new patient	109.12	77.00	109.12			109.12										
		Evaluation and Management, including Rx -Moderately	405.00	100.07	405.00			405.00										
99204		complex, new patient Evaluation and Management, including Rx -Highly complex,	165.88	130.07	165.88			165.88					-					
99205		new patient	207.81	169.04	207.81			207.81										
99211		Evaluation and Management, including Rx -Minimal	20.26	9.18	20.26			20.26										
		Evaluation and Management, including Rx -Straight forward																
99212			43.96	25.14	43.96			43.96										
00040		Evaluation and Management, including Rx -Low complexity	70.47	50.05	70.47			70.47										
99213		Evaluation and Management, including Rx -Moderately	73.47	50.95	73.47			73.47					-					
99214		complex	108.04	78.14	108.04			108.04										
		Evaluation and Management, including Rx -Highly complex																
99215			145.44	110.73	145.44			145.44										
90832		Individual psychotherapy (30 min) MD Only	44.66		44.66			45.55										
90834		Individual psychotherapy (45 min) MD Only	83.95		83.95			85.63										
001PATIEN 90791		CE PROFESSIONAL SERVICES Psychiatric diagnostic evaluation	154.71		108.13	125.97	110.29	177.20										<u> </u>
90791		C&A Psychiatric diagnostic evaluation	154.71		108.13	125.97	110.29	197.91										<u> </u>
90792		Psychiatric diagnostic evaluation with medical services	154.71		108.13	120.01	110.20	177.20						1				<u> </u>
		C&A Psychiatric diagnostic evaluation with medical	-						1			1		1				
90792		services	154.71		108.13			197.91										
90832		Individual psychotherapy (30 min)-Outpatient	51.05		35.68	41.71	36.39	52.07										
90832	V	C&A Individual psychotherapy (30 min)-Outpatient	51.05		35.68	41.71	36.39	61.58										<u> </u>
90833 90833		30 min Psychotherapy add on C&A 30 min Psychotherapy add on	51.05 51.05		35.68 35.68			52.07 61.58										
90834		Individual psychotherapy (45 min)-Outpatient	92.76		65.05	75.58	66.35	94.62										
90834		C&A Individual psychotherapy (45 min)-Outpatient	92.76		65.05	75.58	66.35	109.45										
90836	Y	45 min Psychotherapy add on	92.76		65.05			94.62			Î							
90836	Y	C&A 45 min Psychotherapy add on	92.76		65.05			109.45										
90837		Individual psychotherapy (60 min)						94.62										ļ
90837	v	C&A Individual psychotherapy (60 min)						109.45										I
90838 90838	Y Y	60 min Psychotherapy add on C&A 60 min Psychotherapy add on						94.62 109.45									 	
90838		Psychotherapy for crisis, first 60 min						109.43										
90839		C&A Psychotherapy for crisis, first 60 min				İ	İ	123.15			Î	1		1	1		1	1
90840		Psychotherapy for crisisadditional 30 min						56.34			Î							
90840		C&A Psychotherapy for crisis additional 30 min						64.27										
90846	<u> </u>	Family psychotherapy without patient present	86.72		54.89	72.79	55.99	93.78							ļ			┣───
90846 90847		C&A Family psychotherapy without patient present	86.72 96.60		54.89 66.95	72.79 79.50	55.99 68.29	108.33 98.53										<u> </u>
90847 90847		Family psychotherapy with patient present (45-60 min) C&A Fam psychoth with patient present (45-60 min)	96.60 96.60		66.95	79.50	68.29											
0047		C&A Family psychotherapy with patient presentAbbrev	59.82		41.99	48.72		61.02										
90849		Multiple family group psychotherapy 45 - 60 minutes	00.02		11.00	10.72	12.00	41.44			1			1				
		C&A Multiple family group psychotherapy 45 - 60 minutes				İ	İ				Î	1		1	1		1	t – – – – – – – – – – – – – – – – – – –
90849								43.68										
90849-52		Multiple family group psychotherapyAbbrev						37.20										
90849-52		C&A Multiple family group psychotherapyAbbrev				ļ	ļ	40.11			ļ	ļ		<u> </u>				ļ
12027		Family psycho-education with consumer present				ļ	ļ	55.99			ļ					l		┣───
		Family psycho-education without				I	I	55.99	1		I	1			1	I		L

Public Menta	Healt	th System Rates Effective October 1, 2016																
Procedure	E&M	Service Description	MD	MD/NPP	NPP	PHD	LCSW,	омнс							Traumat	Freestandin		Resident
			non-facility	facility		Psych	RN Ther,	OMITO	On-Site	Off-Site	On/Off Site	FQHC	СМ	Mobile Tx	Brain			Crisis
				POS			LCPC								Injury	Program	Facility	Facility
				21,22,31,32,														
				51,52														
90853		Group psychotherapy (not multi-family.) 45-60 minutes	25.25		25.25	25.76	25.76	40.30										
90853		C&A Group psychotherapy (not multi-family.) 45-60 minutes.	25.25		25.25	25.76	25.76	42.55										
90853-21		Group psychotherapy prolonged (More than 75 minutes)	23.23		23.23	23.70	25.70	52.62										
		C&A Group psychotherapy prolonged (More than 75																
90853-21		minutes)						52.62										
00004		Evaluation and Management, including Rx -Minimal, new	44.00	00.04	44.00			44.00										
99201		patient C & A Evaluation and Management, including Rx -Minimal,	44.36	26.64	44.36			44.36						1				
99201		new patient	44.36	26.64	44.36			44.36										
		Evaluation and Management, including Rx -Straight									Î				1			
99202		forward, new patient	75.44	50.34	75.44			75.44										
99202		C & A Evaluation and Management, including Rx -Straight	75.44	50.34	75.44			75.44										
33202		forward, new patient Evaluation and Management, including Rx -Low complexity,	75.44	50.54	75.44			75.44						<u> </u>				
99203		new patient	109.12	77.00	109.12			109.12										
		C & A Evaluation and Management, including Rx -Low																
99203		complexity, new patient	109.12	77.00	109.12			109.12										
99204		Evaluation and Management, including Rx -Moderately complex, new patient	165.88	130.07	165.88			165.88										
00201		C & A Evaluation and Management, including Rx -						100.00										
99204		Moderately complex, new patient	165.88	130.07	165.88			165.88										
		Evaluation and Management, including Rx -Highly complex,		100.01														
99205		new patient C & A Evaluation and Management, including Rx -Highly	207.81	169.04	207.81			207.81										
99205		complex, new patient	207.81	169.04	207.81			207.81										
99211		Evaluation and Management, including Rx -Minimal	20.26	9.18	20.26			20.26										
		C&A Evaluation and Management, including Rx -Minimal																
99211			20.26	9.18	20.26			20.26										
99212		Evaluation and Management, including Rx -Straight forward	43.96	25.14	43.96			43.96										
55212		C&A Evaluation and Management, including Rx -Straight	40.00	20.14	40.00			43.30										
99212		forward	43.96	25.14	43.96			43.96										
		Evaluation and Management, including Rx -Low complexity																
99213		CRA Evolution and Management including Dr. Law	73.47	50.95	73.47			73.47										
99213		C&A Evaluation and Management, including Rx -Low complexity	73.47	50.95	73.47			73.47										
00210		Evaluation and Management, including Rx -Moderately	10.41	00.00	10.11			10.11										
99214		complex	108.04	78.14	108.04			108.04										
00011		C&A Evaluation and Management, including Rx -	400.04	70.44	400.04			400.04										
99214		Moderately complex Evaluation and Management, including Rx -Highly complex	108.04	78.14	108.04			108.04						1				
			145.44	110.73	145.44			145.44										
		C&A Evaluation and Management, including Rx -Highly												1				
		complex	145.44	110.73	145.44			145.44										
90875		Indiv psychophysio therapy incl biofdbk (20-30 min)	51.05		35.68	41.71	36.39	52.07										
90876 90889		Indiv psychophysio therapy incl biofdbk (45-50 min)	92.76		65.05	75.58	66.35	94.62 22.40										
90889 0929		Discharge OMS (HCFA) Discharge OMS (UB)						22.40									22.40	
		Psych testing, per hour, Ph.D. Lic-Maximum 8 hours per									1			l –				
96101		service				103.02		103.02										
96102		Psychological Testing Computer (Flat rate)				28.66		28.66										
99241		Office Consultation - also used for H&P for PHP (15 Min)	48.00	32.49	48.00													
55241		Office Consultation - also used for H&P for PHP (30 min)	40.00	52.49	40.00													
99242			89.93	68.15	89.93													
		Office Consultation - also used for H&P for PHP (40 min)																
99243			123.01	95.32	123.01							ļ			<u> </u>	<u> </u>	<u> </u>	
99244		Office Consultation - also used for H&P for PHP (60 min)	183.50	153.22	183.50						<u> </u>				<u> </u>		<u> </u>	
99245		Office Consultation - also used for H&P for PHP (80 min)	223.47	189.49	223.47													

Public Menta	I Heal	th System Rates Effective October 1, 2016																T
Procedure	E&M	Service Description														_		
			MD	MD/NPP	NPP	PHD	LCSW,	OMHC	0	011 011	0	50110		M. 1 11. T		Freestandin		Resident.
			non-facility	facility		Psych	RN Ther, LCPC		On-Site	Off-Site	On/Off Site	FQHC	CM	Mobile Tx		Part. Hosp.	Facility	Crisis
				POS			LUPU								Injury	Program	Facility	Facility
				21,22,31,32, 51,52														
		Design and also are free to free act contact becaudite		J1,J2												<u> </u>		┣━━━━
99354		Prolonged phy svc req face-to-face pat contact beyond the						100.07										
		Each additional 30 minutes of a prolonged phy svc																
99355								97.09										<u> </u>
	IOSPIT																	
99221		Initial hospital care (30 min) (MD only)	N/A	101.35	N/A													┣━━━
99221		C&A Initial hospital care (30 min) (MD only)	N/A	101.35	N/A													<u> </u>
99222		Initial hospital care (50 min) (MD only)	N/A	136.61	N/A													<u> </u>
99222		C&A Initial hospital care (50 min) (MD only)	N/A	136.61	N/A													┢────
99223		Initial hospital care (70 min) (MD only)	N/A	202.02	N/A													<u> </u>
99223		C&A Initial hospital care (70 min) (MD only)	N/A	202.02	N/A													<u> </u>
99231		Subsequent IP care (15 min) (MD only)	N/A	39.25	N/A													┣───
99231		C&A Subsequent IP care (15 min) (MD only)	N/A	39.25	N/A							l			 			┣───
99232		Subsequent IP care (25 min) (MD only)	N/A	71.74	N/A							l			 			┣───
99232		C&A Subsequent IP care (25 min) (MD only)	N/A	71.74	N/A													┣───
99233		Subsequent IP care (35 min) (MD only) C&A Subsequent IP care (35 min) (MD only)	N/A	103.59	N/A													┣───
99233			N/A	103.59	N/A													<u> </u>
99238		Hospital discharge day mgmt (30 min or less) (MD only)	N/A	72.35	N/A													<u> </u>
99238		only)	N/A	72.35	N/A													┢────
99239		Hospital discharge day mgmt (>30 min) (MD only)	N/A	107.10	N/A													┢───
99239		C&A Hospital discharge day mgmt (>30 min) (MD only)	N/A	107.10	N/A													┢────
99251		Initial inpatient consultation (20 min) (MD only)	N/A	48.63	N/A													┢────
99252		Initial inpatient consultation (40 min) (MD only)	N/A	74.42	N/A													┢───
99253		Initial inpatient consultation (55 min) (MD only)	N/A	114.34	N/A													┢────
99254		Initial inpatient consultation (80 min) (MD only)	N/A	166.24	N/A													┝───
99255 99281		Initial inpatient consultation (110 min) (MD only) ER Visit	N/A	200.43	N/A													┝───
99281 99282		ER Visit	N/A	21.14	N/A													┣───
99282		ER Visit	N/A	41.23	N/A													
99284		ER Visit	N/A	61.62	N/A													
99285		ER Visit	N/A N/A	116.85 172.43	N/A													
MISCELLAN		LIV VISIC	IN/A	172.43	IN/A													<u> </u>
00104		Anesthesia for ECT	100.24															——
90870		ECT single seizure w/ monitoring (Physician only)	100.24															<u> </u>
30010		Eor single seizure w/monitoring (rinysician only)	100.30									Ind.						<u> </u>
T1015		Clinic visit/encounter, all inclusive rate per day										Rate						
36415		Collection of blood by venipuncture						15.54										
96372		Therapeutic injection						15.54										
SPECIAL SE	RVICE	S																
S0201		Mental health partial hosp, tx <24 hours														211.91		
S0201-52		Intensive outpatient program (IOP)														115.33		1
S9480	1	Intensive OP psych svcs, per diem (clinic model)	1	Ì			Ì	134.93			Ì	Ì		Ì	1			† – –
S9480		C&A Intensive OP psych svcs, per diem (clinic model)						160.40							1			†
H0032		Interdisciplinary team tx plng w/patient present						86.22										
H0046		Therapeutic Nursery						43.90										
OCCUPATIO	NAL T																	
97003		Occupational therapy evaluation, per 15 min					15.68								1			1
97004	1	Occupational therapy re-evaluation, per 15 min	1	Ì			15.68				Ì	Ì		Ì	1	1		† – –
97150	1	Therapeutic procedure(s) group (2 or more)	1	Ì			19.04				Ì	Ì		Ì	1	1		† – –
97530	1	Therapeutic activities, direct patient contact, per 15 min.	1	Ì			12.31				Ì	Ì		Ì	1	1		† – –
97532	1	Development of cognitive skills, direct contact per 15 min.	1	Ì			12.31				Ì	Ì		Ì	1	1		1
97535	l	Self-care/home mgmt trng, per 15 min.					12.31								Ì			Î
97537	1	min.	1	Ì			12.31				Ì	Ì		Ì	1	1		1
	ALTH (CASE MANAGEMENT																
H0031		by program)											113.00		Ī			Î
T1016	1	Mental health case management (Daily rate)		i							1		113.00	i	1			<u> </u>

		th System Rates Effective October 1, 2016																<u> </u>
Procedure	E&M	Service Description				1												┢────
Flocedule	LOUN	Service Description	MD	MD/NPP	NPP	PHD	LCSW,	омнс							Traumat	Freestandin		Resident
			non-facility	facility		Psych	RN Ther,		On-Site	Off-Site	On/Off Site	FQHC	СМ	Mobile Tx		Part. Hosp.		Crisis
				POS			LCPC								Injury	Program	Facility	Facility
				21,22,31,32,														
				51,52														
													\$20.59/					
Г1017		Targeted Case Management (Children and Youth)											15 mins.					
											1		\$20.59/					
Г1017-HG													15 mins.					
MOBILE TRE		NT																
10040-21		Assertive Community Treatment (ACT) EBP									1			1,231.67				
-10040-U9		consumers												1,091.71				
10040		Mobil treatment Non-EBP												873.36				
10040-52		Mobil treatment Non-EBP for Medicare consumers												669.58				
SYCHIATRI	C REH	ABILITATION-RESIDENTIAL REHABILITATION PROGRAM	м															
10002	<u> </u>	Rehabilitation Assessment							64.11	64.11								
12016		Encounter (only bill w/POS 15 (off-site) or 52 (on-site)							-	-	1							
S9445		Any combination of on/off-site PRP svcs for client in a																
		supported employment program. (Must use POS 52 or 15							111.97	111.97	111.97							
H2018-U2		Any combination of on/off-site PRP svcs for Community							111.97	111.97	111.97							
12016-02		client (i.e. child or adult under supv of guardian/parent).																
		(Must use POS 49 & min 3 encounters) (Monthly rate)									444.24							
H2018-U2		On-site PRP svcs only for Community client. (Must use																
2010 02		POS 52 & min 2 encounters) (Monthly rate)							400.00									
H2018-U2		Off-site PRP svcs only for Community client. (Must use							190.62									
12016-02		POS 15 & min 2 encounters) (Monthly rate)								253.61								
H2018-U3		Any combination of on/off-site PRP svcs for Supported								200.01								
12010-03		Living client (i.e. adult living independently). (Must use									704.00							
H2018-U3		On-site PRP svcs only for Supported Living client. (Must									791.62							
12010-03		use POS 52 & min 3 encounters) (Monthly rate)							269.85									
H2018-U3		Off-site PRP svcs only for Supported Living client. (Must							200.00									
2010 00		use POS 15 & min 5 encounters) (Monthly rate)								504 77								
1004.0 1.14		On-site PRP svcs only to Adult in General Level RRP bed.								521.77	 							
H2018-U4		(Must use POS 52 & min 4 encounters) (Monthly rate)																
10040114									465.78									l
H2018-U4		Off-site PRP svcs only to Adult in General Level RRP bed. (Must use POS 15 & min 13 encounters) (Monthly rate)																
										1,250.69								
H2018-U5		On-site PRP svcs only to Adult in Intensive Level RRP bed.																
		(Must use POS 52 & min 4 encounters) (Monthly rate)							465.78									
H2018-U5		Off-site PRP svcs only to Adult in Intensive Level RRP bed.																
		(Must use POS 15 & min 19 encounters) (Monthly rate)								3,249.34								
H2018-U6		Any combination of on/off-site PRP svcs for adult in																
		General Level RRP bed. (Must use POS 49 & min 17									1,716.49							
		Any combination of on/off-site PRP svcs for adult in									.,							
		Intensivel Level RRP bed. (Must use POS 49 & min 23									3,715.14							
Г1023		Transitional PRP. Any combination of on/off-site PRP									3,715.14							
1023		services to adult or TAY consumer transitioning to an RRP																
		or an inpt. Facility. (Must use POS 49 and min 4 encounters									405 70							
		(an at least CO min and)									465.78							<u> </u>
HOUSING SE F2048		S Residential room and board (per day)							10.40									40.44
S5150		Enhanced support (per hour) (10 hour maximum)							13.10									13.10
H0019		Crisis Bed hold (per day)							13.43									40.44
									13.10									13.10
RESPITE CA		Adult Pagaita gaza, pat in home, par diam							70.00									
10045		Adult Respite care, not in home, per diem		 		ļ	ļ		78.66		ļ			 				101-
10045		C&A Respite care, not in home, per diem		 		ļ	ļ	\$2 60/4F			ļ			¢0.60/				181.3
F1005		In home respite care						\$3.63/15 min.						\$3.63/ 15min.				1
		SIS SERVICES						1111(1.						iomin.				
S9485		Residential crisis services (also bill as T2048)																262.54
		10010011101 01010 0011000 (0100 011 05 12040)		I		I	I	I			I		ļ	L				168.8

I2024 Si I2024-21 C I2026 O I2026-21 O I2027 R V0037 R V0038 R V0039 R V0054 D	OYMENT minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by	MD non-facility	MD/NPP facility POS 21,22,31,32, 51,52	NPP	PHD Psych	LCSW, RN Ther, LCPC	OMHC	On-Site	0# 0#4	0					Freestandin		Resident
SUPPORTED EMPLO 12023 m 12024 C 12024-21 C 12026-21 O 12026-21 O 12026-21 C 12026-21 R V0037 R V0038 R V0039 R V0054 D	OYMENT minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by		facility POS 21,22,31,32,	NPP		RN Ther,	OMHC	On-Site	0// 0/4	0							Pacidont
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	OYMENT minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by		facility POS 21,22,31,32,	NPP		RN Ther,	OMHC	On-Site	04 044	0.1011.011							Docidont
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	OYMENT minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by	non-facility	POS 21,22,31,32,		Psych			On-Site									
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by		21,22,31,32,			LCPC		On-One	Off-Site	On/Off Site	FQHC	CM	Mobile Tx	Brain	Part. Hosp.		Crisis
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by													Injury	Program	Facility	Facility
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by		51,52														
12023 m 12024 C 12024-21 C 12026 O 12026-21 O 12026-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	minutes (Auth'd by CSA w/lifetime benefit of \$2,750) Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by																
I2024 Si I2024-21 C I2026 O I2026-21 O I2027 R V0037 R V0038 R V0039 R V0054 D	Supported employment (Pre-placement phase) (Auth'd by CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by																
12024 C 12024-21 C 12026 O 12026-21 O 39445-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	CSA and has a maximum number of 3 units/year) Supported employment (Job placement phase) (Auth'd by								7.70								
I2024-21 Si I2026 O I2026-21 O Si9445-52 C RAUMATIC BRAIN II R V0037 R V0038 R V0039 R V0054 D	Supported employment (Job placement phase) (Auth'd by																
12024-21 C: 12026 O 12026-21 O 039445-52 C: RAUMATIC BRAIN II R V0037 R V0038 R V0039 R V0054 D									447.88								
42026 O 42026-21 O 39445-52 C RAUMATIC BRAIN II V0037 V0037 R V0038 R V0039 R V0039 R V0054 D																	
42026-21 O \$9445-52 C RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0039 R V0054 D	CSA and has a maximum number of 3 units/year)								1,118.57								
39445-52 C RAUMATIC BRAIN II N0037 R V0037 R R V0038 R R V0039 R R V0054 D R	Ongoing support to maintain employment, per month								363.91								
RAUMATIC BRAIN II V0037 R V0038 R V0039 R V0054 D	Ongoing support to maintain employment, per month - EBP								447.88								
V0037 R V0038 R V0039 R V0054 D	Clinic coordination - EBP								111.97								
V0038 Rv V0039 Rv V0054 Di	INJURY																
V0039 Rv V0054 Da	Residential habilitation Level 1 (per day)													200.55			
V0054 D	Residential habilitation Level 2 (per day)													265.55			
	Residential habilitation Level 3 (per day)													367.37			
	Day habilitation Level 1 (per day)													51.78			
V0055 Da	Day habilitation Level 2 (per day)													90.32			
V0056 Da	Day habilitation Level 3 (per day)													127.07			
V0057 SI	Supported employment Level 1 (per day)													30.72			
V0058 Si	Supported employment Level 2 (per day)													51.78			
	Supported employment Level 3 (per day)													127.07			
	Individual Support Services (ISS) (rate per hour)													25.11			
	AVIORAL SERVICES																
In	Initial Assessment & Development of Behavioral Plan for	\$109.80															
	TPS (to be billed in 15 minute incremente)	(\$27.45/ 15															
		mins)															
R	Reassessment and development of new Behavior Plan for	\$103.24	1														<u> </u>
		(\$25.81/ 15															
		mins)															
	,	\$22.44/hr	1														<u> </u>
	designated provider of Therapeutic Behavioral Services) (to																
		minutes)															
* If value of field is 'Y'.	POS 12 for follow-up visits by an OMHC M.D. in a Crisis Be									I							