|                      |              |  | Proposed                        | Mental Health Fee                            |                                   |                      |                         |          |                        |                |
|----------------------|--------------|--|---------------------------------|--|-----------------------------------|----------------------|-------------------------|----------|------------------------|----------------|
|                      |              |  |                                 |  |                                   |                      |                         |          |                        |                |
|                      |              | CB = County Board<br>SS = State Statute  |                                 |  |                                   |                      |                         |          |                        |                |
|                      |              | 33 - State Statute   |                                 |  |                                   |                      |                         |          |                        |                |
| CPT<br>HCPCS<br>Code | Modifier     | Fee Description  | Department                      | Area   | Fee<br>Determination<br>Authority | Last Date<br>Changed | 2023<br>Approved<br>Fee | 2021 Fee | Additional Information | Revenue Impact |
|                      |              | <del>Day Treatment - Med. Asst. Ph.D or LICSW</del>  | Social Services                 | Mental Health Center                         |                                   | <del>1/1/2013</del>  | \$150.00-               | \$150.00 |                        |                |
|                      |              | Diagnostic Interview - Med. Asst. LICSW  | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | <del>\$260.00</del>     | \$260.00 |                        |                |
|                      |              | Diagnostic Interview - Med. Asst. M.D. or Ph. D.   | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$360.00-               | \$360.00 |                        |                |
|                      |              | Diagnostic Interview - Medicare LICSW  | Social Services                 | Mental Health Center                         |                                   | <del>1/1/2009</del>  | \$ <del>260.00</del>    | \$260.00 |                        |                |
|                      |              | Diagnostic Interview - Medicare M.D. or Ph.D   | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$360.00                | \$360.00 |                        |                |
|                      |              | Evaluation Management - 560  | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$100.00                | \$100.00 |                        |                |
|                      |              | Evaluation Management - 561  | Social Services                 | Mental Health Center                         |                                   | <del>1/1/2013</del>  | \$45.00-                | \$45.00  |                        |                |
|                      |              | Evaluation Management - 562  | Social Services                 | Mental Health Center                         |                                   | 1/1/2013             | <del>\$60.00-</del>     | \$60.00  |                        |                |
|                      |              | Evaluation Management - 563  | Social Services                 | Mental Health Center                         | 99202                             | 1/1/2013             | <del>\$90.00-</del>     | \$90.00  |                        |                |
|                      |              | Evaluation Management - 564  | Social Services                 | Mental Health Center                         |                                   | <del>1/1/2013</del>  | \$ <del>120.00</del>    | \$120.00 |                        |                |
|                      |              | Group Therapy - Med. Asst. Ph.D or LICSW   | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$100.00                | \$100.00 |                        |                |
|                      |              | Group Therapy - Medicare LICSW   | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$100.00-               | \$100.00 |                        |                |
|                      |              | Group Therapy - Medicare Ph.D  | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$100.00                | \$100.00 |                        |                |
|                      |              | Individual Therapy - Med. Asst.<br>M.D.,Ph.D,LICSW   | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | \$ <del>125.00</del>    | \$125.00 |                        |                |
|                      |              | Individual Therapy - Medicare LICSW  | Social Services                 | Mental Health Center                         |                                   | <del>5/1/2021</del>  | \$ <del>175.00</del>    | \$125.00 |                        |                |
|                      |              | Individual Therapy - Medicare MD. Ph.D.  | Social Services                 | Mental Health Center                         |                                   | 1/1/2009             | <del>\$125.00</del>     | \$125.00 |                        |                |
| -                    |              |  |                                 |  |                                   |                      |                         |          |                        |                |
| H2011                | HN           | Crisis interven svc, 15 min - Mental Health Prof   | Social Services                 | Mental Health Center                         |                                   |                      | \$62.50                 |          |                        |                |
| H2011<br>H2011       | UA<br>HN 114 | Crisis interven svc, 15 min - Mental Health Prof   | Social Services                 | Mental Health Center                         |                                   |                      | \$62.50                 |          |                        |                |
| H2011<br>H2011       | HN, UA       | Crisis interven svc, 15 min - Mental Health Prof<br>Crisis interven svc, 15 min - Mental Health Prof | Social Services Social Services | Mental Health Center Mental Health Center    |                                   |                      | \$62.50<br>\$62.50      |          |                        |                |
| 99202                |              | OFFICE/OUTPATIENT VISIT NEW  | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 99203<br>99204       |              | OFFICE O/P NEW LOW 30-44 MIN   | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$120.00<br>\$160.00    |          |                        |                |
| 99204                |              | OFFICE O/P NEW MOD 45-59 MIN OFFICE O/P NEW HI 60-74 MIN   | Social Services Social Services | Mental Health Center  Mental Health Center   |                                   |                      | \$160.00                |          |                        |                |
| 99211                |              | OFFICE/OUTPATIENT VISIT, EST   | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 |          |                        |                |
|                      |              |  |                                 |  |                                   |                      |                         | ·        |                        |                |

|                      |          | Proposed Mental Health Fee Schedule   |                                 |  |                                   |                      |                         |          |                        |                |
|----------------------|----------|---|---------------------------------|--|-----------------------------------|----------------------|-------------------------|----------|------------------------|----------------|
|                      |          |   | •                               |  |                                   |                      |                         |          |                        |                |
|                      |          | CB = County Board   |                                 |  |                                   |                      |                         |          |                        |                |
|                      |          | SS = State Statute  |                                 |  |                                   |                      |                         |          |                        |                |
| CPT<br>HCPCS<br>Code | Modifier | Fee Description   | Department                      | Area   | Fee<br>Determination<br>Authority | Last Date<br>Changed | 2023<br>Approved<br>Fee | 2021 Fee | Additional Information | Revenue Impact |
| 99212                |          | OFFICE O/P EST SF 10-19 MIN   | Social Services                 | Mental Health Center                         |                                   |                      | \$60.00                 |          |                        |                |
| 99213                |          | OFFICE O/P EST LOW 20-29 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 99214                |          | OFFICE O/P EST MOD 30-39 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$120.00                |          |                        |                |
| 99215                |          | OFFICE O/P EST HI 40-54 MIN INTERPRETER/INTERACTIVE COMPLEXITY ADD  | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| 90785                |          | ON CONTRACTOR CONTRACTOR CONTRACTOR AND CONTRACTOR | Social Services                 | Mental Health Center                         |                                   |                      | \$95.00                 |          |                        |                |
| 90804                |          | PSYTX, OFFICE, 20-30 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$65.00                 |          |                        |                |
| 90806                |          | PSYTX, OFF, 45-50 MIN   | Social Services                 | Mental Health Center                         |                                   |                      | \$125.00                |          |                        |                |
| 90791                | Q2, 52   | INITIAL EVAL DIAGNOSTIC BRIEF   | Social Services                 | Mental Health Center                         |                                   |                      | \$260.00                |          |                        |                |
| 90791<br>99441       | 52       | DIAGNOSTIC BRIEF PHONE E/M PHYS/QHP 5-10 MIN  | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$260.00<br>\$60.00     |          |                        |                |
| 99441                |          | PHONE E/M PHYS/QHP 11-20 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 99443                |          | PHONE E/M PHYS/QHP 21-30 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$120.00                | 1        |                        |                |
| 99456                |          | DISABILITY EXAMINATION  | Social Services                 | Mental Health Center                         |                                   |                      | \$360.00                | 1        |                        |                |
| 90792                | Q2       | COMP EVAL W MEDICAL SERVICES  | Social Services                 | Mental Health Center                         |                                   |                      | \$360.00                |          |                        |                |
| 90792                | Q2,52    | INITIAL PSYCH DIAG EVAL W/MED SRVCS   | Social Services                 | Mental Health Center                         |                                   |                      | \$360.00                |          |                        |                |
| 90832                |          | PSYTX PT&/FAMILY 30 MINUTES   | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 90833                | -        | PSYTX PT&/FAM W/E&M 30 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$65.00                 |          |                        |                |
| T2023<br>T1013       |          | Targeted case mgmt per month INTERPRETER SERVICE UNIT = 15 MINS   | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$1,252.00<br>\$15.00   |          |                        |                |
| S9484                | 1        | Crisis intervention per 60 Mins   | Social Services                 | Mental Health Center                         |                                   |                      | \$175.00                |          |                        |                |
| S9480                |          | Intensive outpatient psychia  | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 | 1        |                        |                |
| S9480                |          | Intensive outpatient psychia  | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 90785                |          | INTERPRETER/INTERACTIVE COMPLEXITY ADD ON   | Social Services                 | Mental Health Center                         |                                   |                      | \$95.00                 |          |                        |                |
| 90849                |          | MULTIPLE FAMILY GROUP PSYTX   | Social Services                 | Mental Health Center                         |                                   |                      | \$200.00                |          |                        |                |
| 90862                |          | MEDICATION MANAGEMENT   | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 90882                |          | Community Intervention  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 90882                | НК       | ARMHS COMMUNITY INTERVANTION PER SESSION  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 90887                |          | CONSULTATION WITH FAMILY - Non MD   | Social Services                 | Mental Health Center                         |                                   |                      | \$125.00                |          |                        |                |
| 90899<br>96103       |          | PSYCHIATRIC SERVICE/THERAPY PSYCHO TESTING ADMIN BY COMP  | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$62.50<br>\$300.00     |          |                        |                |
| 96130                |          | PSYCHO TESTING ADMIN BY COMP  PSYCL TST EVAL PHYS/QHP 1ST HR  | Social Services                 | Mental Health Center                         |                                   |                      | \$200.00                |          |                        |                |
| 96131                |          | PSYCL TST EVAL PHYS/QHP EA ADDL 60 MINS   | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| 96136                |          | PSYCL/NRPSYC TST PHY/QHP 1ST  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96137                |          | PSYCL/NRPSYC TST PHY/QHP EA   | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96138                |          | PSYCL/NRPSYC TECH 1ST   | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96139                |          | PSYCL/NRPSYC TST TECH EA  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96146<br>97003       | +        | PSYCL/NRPSYC TST AUTO RESULT OT EVALUATION  | Social Services Social Services | Mental Health Center Mental Health Center    |                                   |                      | \$50.00<br>\$125.00     |          |                        |                |
| 97003                | +        | OT RE-EVALUATION  | Social Services Social Services | Mental Health Center  Mental Health Center   |                                   |                      | \$125.00                |          |                        |                |
| 97110                |          | OT THERAPEUTIC EXERCISES 15 MINS  | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 | 1        |                        |                |
| 97112                |          | OT NEUROMUSCULAR REEDUCATION 15 MINS  | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 |          |                        |                |
| 97150                |          | GROUP THERAPEUTIC PROCEDURES OT THERAPEUTIC ACTIVITIES, DIRECT 1:1 15   | Social Services                 | Mental Health Center                         |                                   |                      | \$30.00                 |          |                        |                |
| 97530                |          | MINS OT COGNITIVE SKILLS DEVELOPMENT, DIRECT  | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 |          |                        |                |
| 97532                |          | 1:1 15 MINS  OT SELF CARE/HOME MGMT TRAINING, DIR 1:1   | Social Services                 | Mental Health Center                         |                                   |                      | \$30.00                 |          |                        |                |
| 97535                | -        | 15 MINS   | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 |          |                        |                |
| 97537                |          | COMMUNITY/WORK REINTEGRATION 15 MINS  | Social Services                 | Mental Health Center                         |                                   |                      | \$45.00                 |          |                        |                |
| 90834                | 1        | PSYTX PT&/FAMILY 45 MINUTES   | Social Services                 | Mental Health Center                         |                                   |                      | \$105.00                |          |                        |                |
| 90836<br>90837       | -        | PSYTX PT&/FAM W/E&M 45 MIN PSYTX PT&/FAMILY 60 MINUTES  | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$95.00<br>\$175.00     |          |                        |                |
| 90837                | +        | PSYTX PT&/FAMILY 60 MINUTES PSYTX PT&/FAM W/E&M 60 MIN  | Social Services                 | Mental Health Center                         |                                   |                      | \$175.00                |          |                        |                |
| 90846                | 1        | FAMILY PSYTX W/O PATIENT  | Social Services                 | Mental Health Center                         |                                   |                      | \$125.00                | 1        |                        |                |
| 90882                |          | ARMHS COMMUNITY INTERVANTION PER SESSION  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                | 1        |                        |                |
| 90882                | 1        | SESSION   |                                 |  |                                   |                      | 1                       | j        |                        |                |

|                        |          | Proposed Mental Health Fee Schedule                              |                                 |  |                                   |                      |                         |          | 1                      |                |
|------------------------|----------|--|---------------------------------|--|-----------------------------------|----------------------|-------------------------|----------|------------------------|----------------|
|                        |          |  | Порозси                         | Wiental Health Fee                           | l                                 | l                    | 1                       | l        |                        |                |
|                        |          | CB = County Board  |                                 |  |                                   |                      |                         |          |                        |                |
|                        |          | SS = State Statute   |                                 |  |                                   |                      |                         |          |                        |                |
| CPT<br>HCPCS<br>Code   | Modifier | Fee Description  | Department                      | Area   | Fee<br>Determination<br>Authority | Last Date<br>Changed | 2023<br>Approved<br>Fee | 2021 Fee | Additional Information | Revenue Impact |
| 96130                  | 59       | PSYCL TST EVAL PHYS/QHP 1STHR                                    | Social Services                 | Mental Health Center                         | •                                 |                      | \$200.00                |          |                        | Nevenue impact |
| 96131                  | 59       | PSYCL TST EVAL PHYS/QHP EA ADDL HR W/59<br>MODIFIER              | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| 96136                  | 59       | PSYCL/TST/ADMIN SCORE 2+ TST 1ST 30 MIN                          | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96138                  | 59       | PSYCH TEST ADMIN/SCORE 2+ TEST BY TECH 1ST 30 MINS               | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96139                  | 59       | PSYCL TEST ADMIN/SCORE 2+ TST TECH EA ADDL 30 MINS               | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 96146                  | 59       | PSYCL/NRPSYC TST BY COMPUTER                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$50.00                 |          |                        |                |
| 97150                  | 59       | OT THERAPEUTIC GROUP (2 OR MORE) W/ 59<br>MODIFIER               | Social Services                 | Mental Health Center                         |                                   |                      | \$30.00                 |          |                        |                |
| 99205                  |          | OFFICE/OUTPATIENT VISIT, NEW                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$200.00                |          |                        |                |
| PHP BCBS               |          | PHP Blue Cross Blue Shield                                       | Social Services                 | Mental Health Center                         |                                   |                      | \$600.00                |          |                        |                |
| PHP GEN<br>PHP M       |          | PHP Generic PHP Medica   | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$100.00<br>\$450.00    |          |                        |                |
| PHP MA                 |          | PHP Medicaid   | Social Services                 | Mental Health Center                         |                                   |                      | \$600.00                |          |                        |                |
| S9480                  |          | Intensive outpatient psychia                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| S9484                  |          | Crisis intervention per 60 Mins                                  | Social Services                 | Mental Health Center                         |                                   |                      | \$175.00                |          |                        |                |
| H2035                  | HH       | CORe INDIVIDUAL  | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| H2035                  | HHHQ     | CORe GROUP THERAPY   | Social Services                 | Mental Health Center                         |                                   |                      | \$75.00                 |          |                        |                |
| H2014<br>H2015         | UA       | Skills train and dev, 15 min                                     | Social Services                 | Mental Health Center<br>Mental Health Center |                                   |                      | \$40.00<br>\$40.00      |          |                        |                |
| H2019                  | UA       | Comp comm supp svc, 15 min Ther behav svc, per 15 min            | Social Services Social Services | Mental Health Center                         |                                   |                      | \$40.00                 |          |                        |                |
| H2012                  | UA       | Behav hlth day treat, per hr                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$30.00                 |          |                        |                |
| H0038                  |          | Self-help/peer svc per 15min                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$40.00                 |          |                        |                |
| H0037                  |          | Comm psy sup tx pgm per diem                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$350.00                |          |                        |                |
| 90487                  |          | FAMILY PSYTX W/PATIENT   | Social Services                 | Mental Health Center                         |                                   |                      | \$140.00                |          |                        |                |
| 90853                  |          | GROUP PSYCHOTHERAPY  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| T1016<br>90772         | U8, HN   | Case management THER/PROPH/DIAG INJ, SC/IM                       | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$25.00<br>\$30.00      |          |                        |                |
| H0032                  |          | Mh svc plan dev by non-md 15                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| H0035                  |          | MH PH 60 MINS  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| 99441                  |          | PHONE E/M PHYS/QHP 5-10 MIN                                      | Social Services                 | Mental Health Center                         |                                   |                      | \$60.00                 |          |                        |                |
| 99442                  |          | PHONE E/M PHYS/QHP 11-20 MIN                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$90.00                 |          |                        |                |
| 99443                  |          | PHONE E/M PHYS/QHP 21-30 MIN                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$120.00                |          |                        |                |
| 99456                  |          | DISABILITY EXAMINATION   | Social Services                 | Mental Health Center                         |                                   |                      | \$360.00                |          |                        |                |
| 96101<br>G0129         |          | PSYCHO TESTING BY PSYCH/PHYS Partial hosp prog service           | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$125.00<br>\$88.00     |          |                        |                |
| G0176                  |          | Opps/php;activity therapy  | Social Services                 | Mental Health Center                         |                                   |                      | \$30.00                 |          |                        |                |
| G0177                  |          | Opps/php; train & educ serv                                      | Social Services                 | Mental Health Center                         |                                   |                      | \$35.00                 |          |                        |                |
| G0410                  |          | Grp psych partial hosp 60 MINS                                   | Social Services                 | Mental Health Center                         |                                   |                      | \$70.00                 |          |                        |                |
| G8553                  |          | 1 Rx via qualified eRx sys                                       | Social Services                 | Mental Health Center                         |                                   |                      | \$0.01                  |          |                        |                |
| H0001<br>H0031         | -        | Alcohol and/or drug assess Mh health assess by non-md 15 Min     | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$360.00<br>\$260.00    |          |                        |                |
|                        | UD       | INITIAL ARMHS FUNC ASSESS, NON PHYS = 15                         | Social Services                 | Mental Health Center                         |                                   |                      | \$44.00                 |          |                        |                |
| H0031                  | UD, TS   | MINS W/UD  ARMHS FUNC ASSESS REVIEW OR UPDATE, NON PHYS = 15 MIN | Social Services                 | Mental Health Center                         |                                   |                      | \$44.00                 |          |                        |                |
| H0031<br>H0032         | υυ, 13   | Mh svc plan dev by non-md 15                                     | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| H0032                  | Q2,UD    | ARMHS COMP INTGR TREATMENT PLAN W/ Q2                            | Social Services                 | Mental Health Center                         |                                   |                      | \$150.00                |          |                        |                |
| H0032<br>H0035         | UD       | COMP INTEGRATED TX PLAN INITIAL MH PH 60 MINS                    | Social Services Social Services | Mental Health Center<br>Mental Health Center |                                   |                      | \$150.00<br>\$100.00    |          |                        |                |
| H0035LVL2U5            |          | MH PEER SVC LEVEL II IND, MOD U5, 15 MINS                        | Social Services                 | Mental Health Center                         |                                   |                      | \$40.00                 |          |                        |                |
| H0035MB                |          | PHP MEDICARE UNDER 24 HRS  | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
| H0035MHLVL2<br>H0035OT |          | MH PEER SVC LEVEL II, 15 MINS PH WITH OT/DAY UNIT = 60 MINS      | Social Services                 | Mental Health Center<br>Mental Health Center |                                   |                      | \$40.00<br>\$100.00     |          |                        |                |
| H003501                |          | PHP BCBS UNDER 24 HRS  | Social Services Social Services | Mental Health Center                         |                                   |                      | \$600.00                |          |                        | +              |
| H0035PHPERD            |          | PARTIAL HOSP PER DIEM  | Social Services                 | Mental Health Center                         |                                   |                      | \$450.00                |          |                        |                |
| H0035PHPGEN            |          | PHP GENERIC INSURANCE UNDER 24 HRS                               | Social Services                 | Mental Health Center                         |                                   |                      | \$100.00                |          |                        |                |
|                        | •        | •  |                                 |  | •                                 |                      |                         | •        | •                      | •              |

|              |          |                                       | Proposed        | Mental Health Fee    | Schedule                          |                      |                  |          |                        |                |
|--------------|----------|---------------------------------------|-----------------|----------------------|-----------------------------------|----------------------|------------------|----------|------------------------|----------------|
|              |          |                                       |                 |                      |                                   |                      |                  |          |                        |                |
|              |          | CB = County Board SS = State Statute  |                 |                      |                                   |                      |                  |          |                        |                |
|              |          |                                       |                 |                      |                                   |                      |                  |          |                        |                |
|              |          |                                       |                 |                      |                                   |                      |                  |          |                        |                |
| CPT<br>HCPCS |          | Fee Description                       | Department      | Area                 | Fee<br>Determination<br>Authority | Last Date<br>Changed | 2023<br>Approved | 2021 Fee | Additional Information |                |
| Code         | Modifier |                                       |                 |                      | Authority                         |                      | Fee              |          |                        | Revenue Impact |
| H0035PHPM    |          | PHP MEDICA UNDER 24 HRS               | Social Services | Mental Health Center |                                   |                      | \$450.00         |          |                        |                |
| H0035PHPMA   |          | PHP MEDICAID UNDER 24 HRS             | Social Services | Mental Health Center |                                   |                      | \$600.00         |          |                        |                |
| H0037        |          | Comm psy sup tx pgm per diem          | Social Services | Mental Health Center |                                   |                      | \$350.00         |          |                        |                |
| H0046        |          | CRT PROVIDER TRAVEL TIME UNIT = 1 MIN | Social Services | Mental Health Center |                                   |                      | \$1.00           |          |                        |                |
| H2017        |          | Psysoc rehab svc, per 15 min          | Social Services | Mental Health Center |                                   |                      | \$22.00          |          | _                      |                |
| H2022        |          | Com wrap-around sv, per diem          | Social Services | Mental Health Center |                                   |                      | \$350.00         |          |                        |                |
|              |          |                                       |                 |                      |                                   |                      |                  |          |                        |                |