AMI and SED Standard Procedure Codes and Modifiers Effective 10/01/2018

			Adult	Children
CPT Code	CPT Description	Crosswalk Category	Rate	Rate
	Psych Eval (no medical svc)	Assess Health Psych Eval	\$165.00	
	Psych Eval (w/medical svc)	Assess Health Psych Eval	\$205.00	
90832	Psychotherapy, 30 (16-37 mins)	Therapy, Mntl Hlth Chd/Adlt	\$65.00	
90833	Psych Eval - add on 30 (16-37 mins)	Assess Health Psych Eval	\$57.28	
90834	Psychotherapy, 45 (38-52 mins)	Therapy, Mntl Hlth Chd/Adlt	\$125.00	
90836	Psych Eval - add on , 45 (38-52 mins)	Assess Health Psych Eval	\$72.03	
90837	Psychotherapy, 60 (53+ mins)	Therapy, Mntl Hlth Chd/Adlt	\$165.00	
90839	Psychotherapy for crisis, 60 min	Therapy, Mntl Hlth Chd/Adlt	\$105.00	
90840	Psychotherapy for crisis, 30 min	Therapy, Mntl Hlth Chd/Adlt	\$60.00	
90846	FAMILY PSYTX W/O PATIENT	Therapy, Mntl Hlth Chd/Adlt	\$115.00	
90847	FAMILY PSYTX W/PATIENT	Therapy, Mntl Hlth Chd/Adlt	\$115.00	
90849	Multi-family Group	Therapy, Mntl Hlth Chd/Adlt	\$20.00	
90853	GROUP PSYCHOTHERAPY	Therapy, Mntl Hlth Chd/Adlt	\$40.00	
90887	CONSULTATION WITH FAMILY	Assess Health Psych Eval	\$65.00	
96101	Psychological testing per hr FF	Assess Health Psych Eval	\$125.00	
96102	Psych testing with qual hlth prf	Assess Health Psych Eval	\$125.00	
96110	Developmental Test, Limited	Assess Health Psych Eval	\$125.00	
96111	DEVELOPMENTAL TEST, EXTE	Assess Health Psych Eval	\$210.00	
96118	Psychological testing	Assess Health Psych Eval	\$130.10	
96372	Injection Administration	Health Services	\$25.00	
97003	OT EVALUATION	Occupational Therapy	\$266.44	
97530	THERAPEUTIC ACTIVITIES	Occupational Therapy	\$35.00	
99201	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental Hlth	\$55.00	
99202	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental HIth	\$80.00	
99203	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental HIth	\$105.00	
99204	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental Hlth	\$138.50	
99205	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental HIth	\$185.00	
99211	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental HIth	\$35.00	
99212	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental Hlth	\$65.00	
99213	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental Hlth	\$100.00	
99214	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental HIth	\$125.00	
99215	OFFICE/OUTPATIENT VISIT,	Physician Srvcs-Mental Hlth	\$150.00	
99308	E & M - Nursing Facility	Assess Health Psych Eval	\$40.00	
99309	E & M - Nursing Facility	Assess Health Psych Eval	\$65.00	
	E & M - Nursing Facility	Assess Health Psych Eval	\$80.00	
	REST HOME VISIT - 15 Minutes	Physician Srvcs-Mental Hlth	\$60.00	
99335	REST HOME VISIT - 25 Minutes	Physician Srvcs-Mental HIth	\$85.00	
99336	REST HOME VISIT - 45 Minutes	Physician Srvcs-Mental Hlth	\$100.00	
	HOME VISIT, IM INJECTION	Medication Administration	\$160.12	
	NON-ER TRANSPORT:MINI-BU	Transportation	\$9.59	
A0130	Non-ER Wheelchair Van	Transportation	\$10.00	
	TRNG & EDU-PT W/MENTAL PROB	Family Skills Trng/Support	\$96.04	
	BEHAVIORAL HEALTH OUTREACH	Peer Directed & Op Supp Ser	\$92.79	
	Assessment, by non Phys; BioPsychoSocial	Assessment: Health, Psych Eval, others.	\$140.00	\$195.00
	Assessment, by non Phys; DECA	Assessment: Health, Psych Eval, others.	n/a	\$195.00
	Assessment, by non Phys; Child-FBA	Assessment: Health, Psych Eval, others.	n/a	\$195.00
	Assessment, by non Phys; CAFAS	Assessment: Health, Psych Eval, others.	n/a	\$195.00
	Assessment, by non Phys; JIFF	Assessment: Health, Psych Eval, others.	n/a	\$195.00
	Assessment, by non Phys; LOCUS	Assessment: Health, Psych Eval, others.	\$140.00	
	Assessment, by non Phys; PECFAS	Assessment: Health, Psych Eval, others.	n/a	\$195.00
	Assessment, by non Phys; Trauma-CBT	Assessment: Health, Psych Eval, others.	\$140.00	
	Assessment, by non Phys; Vocational	Assessment: Health, Psych Eval, others.	\$140.00	
H0032	MH Service Plan Dev. non-phys	Treatment Planning	\$140.00	
H0034	Med training and supp, 15 min	Health Services	\$32.50	
H0036	Home Based Services	Home Based Services	n/a	\$70.00
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AMI and SED Standard Procedure Codes and Modifiers Effective 10/01/2018

		ective 10/01/2018		
CDT Code	CDT Description	Construction Contraction	Adult	Children
	CPT Description	Crosswalk Category	Rate	Rate
H0038	Self-Help/Peer Services	Peer Directed & Op Supp Ser	\$8.75	
H0039	Assertive Comm Treatment, 15 min	ACT Assertive Comm Treat	\$48.50	
H0039-TG	Screening to determine appropriateness of	ACT Assertive Comm Treat	\$48.50	n/a
	Inpatient admission - by ACT Team			
H0043	Community Living Supports, Unlicensed, day	Community Living Supports	Varies	n/a
H0045	Respite Care, Out of Home, day.	Respite Care	\$150.00	\$150.00
H2000	Comprehensive multidisciplinary	Behavior Management Rev	\$85.00	\$110.00
H2014	Skills training and development	Skill Building Assistance	\$4.82	n/a
H2015	Comprehensive Comm.	Community Living Supports	\$5.74	\$5.74
H2016	Comp Comm Supports, per diem, Licensed	Community Living Supports	Varies	n/a
H2021	Specialized Wraparound, 15 minutes	Wraparound Services	n/a	\$95.00
H2023	Supported employment per 15 min	Supported Employment Srvcs	\$8.92	n/a
H2030	Mental Health Clubhouse	Clubhouse Psych Rehab Prog	\$4.25	n/a
H2033	Multisystemic therapy	Home Based Services	n/a	\$105.00
S5111	Home care training, fam; session	Family Skills Trng/Support	\$150.00	\$185.00
S9445	Patient educ non-phys, ind, sess	Health Services	\$57.50	\$75.00
S9446	Patient educ non-phys, grp, sess	Health Services	\$40.00	\$50.00
S9470	Nutritional Counseling, Dietitian	Health Services	\$65.00	n/a
T1001	Nursing assessment / evaluation	Assess Health Psych Eval	\$105.00	\$105.00
T1002	RN services, up to 15 minutes	Health Services	\$37.50	\$37.50
T1005	Respite Care, 15 minutes	Respite Care	\$5.24	\$5.24
T1016	Case management, 15 min	Supports Coordination	\$56.50	\$56.50
T1017	Targeted case mgmt, 15 min	Targeted Case Management	\$56.50	\$75.00
T1020	Personal Care per diem, Licensed	Personal Care	Varies	n/a
T1999	Misc. Therapeutic Items	Enhanced Pharmacy	Varies	Varies
T2038	Community Transition, actual costs	Housing Assistance	Varies	n/a

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