Mental Health Services for Adults

Mental Health - Service Description	Modifier	CY23 Rate
0912 - Partial Hospitalization*		\$288.75
90785 - Interactive Complexity - Add on code; limited use per Code Chart		\$15.11
90791 - Psych Eval (no medical svc)		\$176.80
90792 - Psych Eval (w/medical svc)		\$200.24
90832 - Psychotherapy, 30 (16-37 mins)		\$76.34
90833 - Psychotherapy, 30 minutes, performed with Evaluation & Mangement (add-on code).		\$70.70
90834 - Psychotherapy, 45 (38-52 mins)		\$101.15
90837 - Psychotherapy, 60 (53+ mins)		\$148.63
90839 - Psychotherapy for crisis, 60 min		\$143.32
90840 - Psychotherapy for crisis, each additional 30 minutes		\$71.83
90846 - Family Therapy Without Consumer Present		\$97.06
90847 - Family Therapy With Consumer Present		\$101.12
90853 - Group Therapy		\$27.18
92507 - Speech & Language, Individual		\$77.92
92508 - Speech & Language, Group		\$24.19
92522 - Speech & Language, evaluation of speech sound production		\$113.40
92523 - Evaluation of Speech Sound Production with evaluation of language comprehension		\$231.59
92610 - Speech/Language - Evaluation of oral & pharyngeal swallowing function		\$86.32
96110 - Developmental Screening**		137.81
96116 - Neurobehavioral Status Exam, First Hour.		\$94.79
96121 - Neurobehavioral Status Exam, Each additional Hour.		\$76.68
96130 - Psychological testing evaluation services by physician or other qualified health care professional,		\$122.33
including interpretation of standardized test results and clinical data, clinical decision making, treatment		
planning and report; First hour.		
96131 - Psychological testing evaluation services by physician or other qualified health care professional,		\$87.51
including interpretation of standardized test results and clinical data, clinical decision making, treatment		
planning and report; Each additional Hour.		

96132 - Neuropsychological testing evaluation services by physician or other qualified health care	\$132.08
professional, including interpretation of standardized test results and clinical data, clinical decision making,	
treatment planning and report; First hour.	
96133 - Neuropsychological testing evaluation services by physician or other qualified health care	\$99.61
professional, including interpretation of standardized test results and clinical data, clinical decision making,	
treatment planning and report; Each additional hour.	
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified	\$42.97
health care professional, two or more tests, any method; First 30 minutes.	
96137 - Psychological or neuropsychological test administration and scoring by physician or other qualified	\$39.35
health care professional, two or more tests, any method; Each additional 30 minutes.	
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests,	\$34.18
any method; First 30 minutes.	
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests,	\$35.19
any method; Each additional 30 minutes.	
96372 - Medication Administration (injection)	\$14.40
97110 - OT/PT Strength ROM - Individual	\$29.93
97150 - OT Group Therapeutic Activities	\$18.13
97166 - OT Moderate Complexity	\$102.19
97167 - OT High Complexity	\$102.19
97168 - OT Evaluation	\$70.77
97530 - OT/PT Individual Therapeutic Activities	\$37.66
97533 - OT/PT Sensory Integrative Techniques, 15 minutes	\$64.23
97802 - Medical Nutrition Therapy, initial assessment and intervention, 15 min.	\$37.02
97803 - Medical Nutrition Therapy, re-assessment and intervention, 15 min.	\$32.29
99202 - E&M visit, new paitient, 3 component review, 20 minutes.	\$74.36
99203 - E&M visit, new paitient, 3 component review, 30 minutes.	\$116.28
99204 - E&M visit, new paitient, 3 component review, 45 minutes.	\$172.05
99205 - E&M visit, new paitient, 3 component review, 60 minutes.	\$227.25
99211 - E&M visit, established patient, brief.	\$23.47
99212 - E&M visit, established patient, 2 component review, 10 minutes	\$58.04
99213 - E&M visit, established patient, 2 component review, 15 minutes.	\$92.74
99214 - E&M visit, established patient, 2 component review, 25 minutes.	\$131.14

99215 - E&M visit, established patient, 2 component review, 40 minutes.	\$183.86
99221 - Inpatient Subsequent Care by a physician	\$87.27
99222 - Inpatient Subsequent Care by a physician	\$135.18
99223 - Inpatient Subsequent Care by a physician	\$179.37
99231 - Inpatient Subsequent Care by a physician	\$51.98
99232 - Subsequent Hospital Care - 25 mins	\$81.85
99233 - Subsequent Hospital Care - 35 minutes	\$123.12
99238 - HOSPITAL DISCHARGE DAY	\$83.28
99305 - NURSING FACILITY SERVICES E&M, new, 3 components, 35 minutes.	\$137.26
99306 - NURSING FACILITY SERVICES E&M, new, 3 components, 45 minutes.	\$186.86
99307 - NURSING FACILITY SERVICES E&M, established, 2 components, 10 min.	\$40.44
99308 - NURSING FACILITY SERVICES E&M, established, 2 components, 15 min.	\$76.61
99309 - NURSING FACILITY SERVICES E&M, established, 2 components, 25 min.	\$109.17
99310 - NURSING FACILITY SERVICES E&M, established, 2 components, 35 min.	\$157.41
99334 - Domiciliary care, Rest Home E&M, established, 2 components, 15 min. DISCONTINUED 12/31/2022.	\$0.00
Use 99347	
99335 - Domiciliary care, Rest Home E&M, established, 2 components, 25 min. DISCONTINUED 12/31/2022.	\$0.00
Use 99348.	
99336 - Domiciliary care, Rest Home E&M, established, 2 components, 40 min DISCONTINUED 12/31/2022.	\$0.00
Use 99349.	
99347 - Home visit, E&M established patient, 20 minutes.	\$45.54
99348 - Home visist, E&M established patient, 30 minutes.	\$77.88
99349 - Home visist, E&M established patient, 40 minutes.	\$131.30
99441 - Telephone evaluation and management, established patient, parent or guardian; not related to E &	\$56.91
M service in the past 7 days nor leading to an E & M services within the next 24 hours or next available	
appointment. (5 to 10 minutes of medical discussion.)	
99442 - Telephone evaluation and management, established patient, parent or guardian; not related to E &	\$92.74
M service in the past 7 days nor leading to an E & M services within the next 24 hours or next available	
appointment. (11 to 20 minutes of medical discussion.)	
99443 - Telephone evaluation and management, established patient, parent or guardian; not related to E &	\$130.01
M service in the past 7 days nor leading to an E & M services within the next 24 hours or next available	

99506 - Medication Administration, home visit for intramuscular injection (non-physician)**	176.53
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*Based on Hospital Rate. **Based on Adult Outpatient Rate.

MI Health Link Opioid Treatment Program (Effective 01-01-2020)

Opioid Treatment Program - Service Description	Modifier	CY23 Rate
G2067 - Medication assisted treatment, methadone; weekly bundle including dispensing and/or		\$248.75
administration, substance use counseling, individual and group therapy, and toxicology testing, if performed		
(provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2068 - Medication assisted treatment, buprenorphine (oral); weekly bundle including dispensing and/or		\$289.98
administration, substance use counseling, individual and group therapy, and toxicology testing if performed		
(provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2069 - Medication assisted treatment, buprenorphine (injectable); weekly bundle including dispensing		\$1,954.28
and/or administration, substance use counseling, individual and group therapy, and toxicology testing if		
performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2070 - Medication assisted treatment, buprenorphine (implant insertion); weekly bundle including		\$5,412.69
dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology		<i>\$</i> 3)122103
testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2071 - Medication assisted treatment, buprenorphine (implant removal); weekly bundle including		\$483.61
dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology		·
testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2072 - Medication assisted treatment, buprenorphine (implant insertion and removal); weekly bundle		\$5,648.16
including dispensing and/or administration, substance use counseling, individual and group therapy, and		
toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2073 - Medication assisted treatment, naltrexone; weekly bundle including dispensing and/or	+	\$1,557.02
administration, substance use counseling, individual and group therapy, and toxicology testing if performed		
(provision of the services by a Medicare-enrolled Opioid Treatment Program)		

G2074 - Medication assisted treatment, weekly bundle not including the drug, including substance use		\$198.17
counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a		
Medicare-enrolled Opioid Treatment Program)		
G2075 - Medication assisted treatment, medication not otherwise specified; weekly bundle including	L5	Varies
dispensing and/or administration, substance use counseling, individual - group therapy, and toxicology		
testing, if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)		
G2076 - Intake activities, including initial medical examination that is a complete, fully documented physical		\$192.85
evaluation and initial assessment by a program physician or a primary care physician, or an authorized		
healthcare professional under the supervision of a program physician or qualified personnel that includes		
preparation of a treatment plan that includes the patient's short-term goals and the tasks the patient must		
perform to complete the short-term goals; the patient's requirements for education, vocational		
rehabilitation, and employment; and the medical, psycho- social, economic, legal, or other supportive		
services that a patient needs, conducted by qualified personnel (provision of the services by a Medicare-		
enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.		
G2077 - Periodic assessment; assessing periodically by qualified personnel to determine the most		\$118.51
appropriate combination of services and treatment (provision of the services by a Medicare-enrolled Opioid		
Treatment Program); List separately in addition to code for primary procedure.		
G2078 - Take-home supply of methadone; up to 7 additional day supply (provision of the services by a		\$39.29
Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.		
G2079 - Take-home supply of buprenorphine (oral); up to 7 additional day supply (provision of the services		\$80.53
by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary		
procedure.		
G2080 - Each additional 30 minutes of counseling in a week of medication assisted treatment, (provision of		\$33.25
the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for		
primary procedure.		