

Reimbursement and Coding Summary - Version 8 12.12.2014

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Please refer to the Services Manual for service definitions.

Parent Support and Training

Modifier-HQ (Group setting)								
Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
S5110				Ind.	Home care training, family; per 15 minutes	15 min.	\$10.00	\$40.00
S5110	HQ			Grp.	Home care training, family; per 15 minutes, group setting	15 min.	\$2.50	\$10.00

Youth Support and Training

Modifier HQ (group setting) HSD (High school diploma)

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H0038			HSD	Ind.	Self-help/peer services; per 15 minutes	15 min.	\$10.00	\$40.00

Independent Living/Skills Building

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H2014				Ind.	Skills training and development; per 15 minutes	15 min.	\$7.80	\$31.20

Short Term Respite Care

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
S5150				Ind.	Unskilled respite care, not hospice; per 15 minutes	15 min.	\$3.90	\$15.60

Crisis Stabilization

Modifier: HA (Child/adolescent program)								
Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H0045	HA			Ind.	Respite care service, not in the home; per diem	Day	\$180.00	

Crisis Stabilization

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H0045	HB			Ind.	Respite care service, not in the home; per diem	Day	\$180.00	

Case Conference

Modifiers- HA (Child/adolescent program) HB (Adult program)								
Reimbursement and Coding Summary								
CPT Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
99367	HA/HB		Physician	Ind.	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30 minutes or more; participation by physician	30 min. or more	HA \$9.86 HB \$15.00	
99368	HA/HB		Non-Physician	Ind.	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30 minutes or more; participation by non-physician qualified health care professional	30 min. or more	HA \$9.86 HB \$15.00	

Psychosocial Rehabilitation (PSR)

Modifiers- HA (Child/adolescent program) HB (Adult program) HQ (Group setting) HSD (high school diploma)								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H2017			HSD	Ind.	PSR services, per 15 minutes, individual office	15 min.	\$10.99	\$43.96
H2017			HSD	Ind.	PSR services, per 15 minutes, individual community	15 min.	\$12.67	\$50.68
H2017	HA	HQ	HSD	Grp.	PSR services, per 15 minutes, child/adolescent program, office group	15 min.	\$2.20	\$8.80
H2017	HA	HQ	HSD	Grp.	PSR services, per 15 minutes, child/adolescent program group	15 min.	\$2.53	\$10.12
H2017	HB	HQ	HSD	Grp.	PSR services, per 15 minutes, adult program, non-geriatric, office group	15 min.	\$1.37	\$5.48
H2017	HB	HQ	HSD	Grp.	PSR services, per 15 minutes, adult program, non-geriatric group community	15 min.	\$1.59	\$6.36

Crisis Intervention

Modifiers- HM (Less than bachelor degree level) HN (Bachelors degree level) HO (Masters degree level) TS (Follow up services)

Reimbursement and Coding Summary

HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Diem
S9485	HM		AA/AS	Ind.	Crisis intervention mental health services, per diem, less than bachelor's level	Per Diem		\$278.05
H2011	HM	TS	AA/AS	Ind.	CI service, per 15 minutes, less than bachelor's level, follow-up service	15 min.	\$23.17	\$92.68
S9485	HN/HO		BA/BS	Ind.	Crisis intervention mental health services, per diem, bachelor's and master's degree level	Per diem		\$353.65
H2011	HN/HO	TS	BA/BS	Ind.	CI service, per 15 minutes, bachelor's and master's degree level, follow-up service	15 min.	\$31.69	\$126.76

Community Psychiatric Support and Treatment

Modifiers-AM (Physician, team member) TD (Registered nurse) HN (Bachelors degree level) HO (Masters degree level) HM (Less than a Bachelor's degree level) HE (Mental health program) HH (Integrated mental health/substance abuse program) HK (Specialized mental health programs for high-risk populations)

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Rate Per	
	(1)	(2)					Unit	Hour
H0036	HM/HN		BA/BS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, less than bachelor's and bachelor's degree level, individual office	15 min.	\$14.87	\$59.48
H0036	HO			Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, master's degree level, individual office	15 min.	\$18.06	\$72.24
H0036	HM/HN		BA/BS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, bachelor's degree level, home or community (12 and 99)	15 min.	\$16.85	\$67.40
H0036	HO		MA/MS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, master's degree level, home or community (12 and 99) SMO needs to specify other POS	15 min.	\$20.28	\$81.12
H0036	HN	HK	BA/BS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, specialized mental health programs for high-risk populations (Homebuilders), *EBP	15 mi.	\$30.61	\$122.44
H0036	HO	HK	MA/MS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, specialized mental health programs for high-risk populations (Homebuilders), *EBP	15 min.	\$37.03	\$148.12
H0036	HN	HE	BA/BS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, mental health program, bachelor's degree level family functional therapy (FFT), *EBP	15 min.	\$31.70	\$126.80
H0036	HO	HE	MA/MS	Ind.	Community psychiatric supportive treatment, face-to-face, per 15 minutes, mental health program, master's degree level (FFT), *EBP	15 min.	\$38.55	\$154.20
H0039	AM				Assertive Community Treatment per diem *EBP (youth 18-20)	Per Diem	\$373.88	
H0039	TD				Assertive Community Treatment per diem *EBP (youth 18-20)	Per Diem	\$151.11	
H0039	HO				Assertive Community Treatment per diem *EBP (youth 18-20)	Per Diem	\$151.11	
H0039	HN				Assertive Community Treatment per diem *EBP (youth 18-20)	Per Diem	\$112.63	
H0039	HM				Assertive Community Treatment per diem *EBP (youth 18-20)	Per Diem	\$86.04	
H0039			Team	Ind.	Assertive Community Treatment, face-to-face, per 15 minutes, *EBP Adult (21 over)	PMPM	Set By SMO	
H2033	HN		BA/BS	Ind.	Multisystemic therapy for juveniles, per 15 minutes, bachelor's degree level, *EBP	15 min.	\$30.23	\$120.92
H2033	HO		MA/MS	Ind.	Multisystemic therapy for juveniles, per 15 minutes, *EBP	15 min.	\$36.01	\$144.04

Therapeutic Group Home (TGH)

Modifiers-HH (Integrated mental health/substance abuse) HK (Specialized mental health program for high risk population) HU (Funded by child welfare agency "DCFS") HW (Funded by state mental health agency "OBH") HY (Funded by juvenile justice agency "OJJ") HE (Mental health program)								
Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Interim Rate Per	
	(1)	(2)					Per Diem Unit	Hour
H0018					BH, short-term residential (non-hospital residential treatment program) without room and board, per diem	Per diem (medical portion only)	\$154.06	
H0018	HU				BH, short-term residential (non-hospital residential treatment program) room and board, per diem HU = funded by state child welfare agency (Room and Board) Note: Room and Board not eligible for Medicaid funding. MMIS will not accept as encounter data.	Per diem (room and board)	\$89.26	
H0018	HY				BH, short-term residential (non-hospital residential treatment program), room and board, per diem HY = funded by Juvenile Justice agency (Room and Board) Note: Room and Board not eligible for Medicaid funding. MMIS will not accept as encounter data.	Per diem (room and board)	\$89.26	
H0018	HW				BH, short-term residential (non-hospital residential treatment program), room and board, per diem HW = funded by state mental health agency (Room and Board) Note: Room and Board not eligible for Medicaid funding. MMIS will not accept as encounter data.	Per diem (room and board)	\$89.26	

H0018	HK		BA/BS	Ind.	BH, short-term residential (non-hospital residential treatment program), without room and board, per diem, specialized mental health programs for high-risk populations (sexual offender)	Per diem (medical portion only)	\$154.06	
H0018	HE		BA/BS	Ind.	BH, short-term residential (non-hospital residential treatment program), without room and board, per diem, mental health program (BH)	Per diem (medical portion only)	\$154.06	
H0018	HH		BA/BS	Ind.	BH, short-term residential (non-hospital residential treatment program), without room and board, per diem, integrated mental health/substance abuse program	Per diem (medical portion only)	\$154.06	

Non-Medical Group Home (NMGH)

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Interim Rate Per	
	(1)	(2)					Per Diem Unit	Hour
T2048 BH					BH, short-term residential (non-hospital residential treatment program), without room and board, per diem HE = funded by state child welfare agency (Room and Board) Note: Room and Board not eligible for Medicaid funding. MMIS will not accept as encounter data.	Per diem (room and board)	\$125.63	

Therapeutic Foster Care (TFC)

Reimbursement and Coding Summary								
HCPCS Code	Modifier		Provider Qual.	Tx Context	Description	Units	Interim Rate Per	
	(1)	(2)					Per Diem Unit	Hour
S5145					BH, short-term residential (non-hospital residential treatment program), without room and board, per diem SE = funded by state child welfare agency (Room and Board) Note: Room and Board not eligible for Medicaid funding. MMIS will not accept as encounter data.	Per diem (room and board)	\$65.71	

Addiction Services

Modifiers-HA (Child/adolescent program) HB (Adult program non-geriatric) HF (Substance abuse program) HM (Less than bachelors degree level) HN (Bachelors degree level) HO (Masters degree level) HQ (Group setting) HR (Family/couple with client present) HS (Family/couple without client present) HW (Funded by state mental health) TG (Complex high tech level of care)

Reimbursement and Coding Summary					
HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H0001	HN/HO		Alcohol and/or drug assessment (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session	\$65.27
H0001	HM		Alcohol and/or drug assessment (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (one visit)	\$43.44
H0004	HM	HF	BH Counseling and therapy, unlicensed (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (45 min)	\$34.25
H0004	HN/HO	HF	BH Counseling and therapy, unlicensed (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (45 min)	\$42.38

HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H0005	HN/HO		Alcohol and/or drug services, group counseling by a clinician (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (60 min)	\$9.23 per person
H0005	HM	HR/HS	Alcohol and/or drug services, group counseling by a clinician (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (60 min)	\$15.23 per family member
H0005	HM		Alcohol and/or drug services, group counseling by a clinician (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (60 min)	\$6.52 per person
H0005	HN/HO	HR/HS	Alcohol and/or drug services, group counseling by a clinician (unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**	one session (60 min)	\$21.53 per family member
H0011	HB		Alcohol and/or drug services; acute detoxification (residential addiction program inpatient) (Adult only Level III.7D)	Per diem (medical portion)	\$166.50
H0011	HW	HB	Alcohol and/or drug services; acute detoxification (residential addiction program inpatient) (Adult only Level III.7D)	Per diem (room and board)	\$43.50

HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H0012	HA		Alcohol and/or drug abuse service; subacute detoxification (residential addiction program outpatient) (Level III.2D)	Per diem	\$44.06
H0012	HW	HA	Alcohol and/or drug abuse service; subacute detoxification (residential addiction program outpatient) (Level III.2D)	Per diem (room and board)	\$45.80
H0012	HB		Alcohol and/or drug abuse service; subacute detoxification (Adult only residential addiction program outpatient) (Level III.2D)	Per diem (medical portion)	\$72.15
H0012	HW	HB	Alcohol and/or drug abuse service; subacute detoxification (Adult only residential addiction program outpatient) (Level III.2D)	Per diem (room and board)	\$17.85
H0015	HM		Alcohol and/or drug services, intensive outpatient (treatment program that operates at least three hours/day and at least three days/week and is based on an individualized treatment plan), including assessment, counseling, CI and activity therapies or education (licensed and unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level** (Level II.1)	Per 15 min.	\$11.44
H0015	HM	HQ	Alcohol and/or drug services, intensive outpatient (treatment program that operates at least three hours/day and at least three days/week and is based on an individualized treatment plan), including assessment, counseling, CI and activity therapies or education (licensed and unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level** (Level II.1)	Per 15 min.	\$1.64 per person

HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H0015	HN/HO		Alcohol and/or drug services, intensive outpatient (treatment program that operates at least three hours/day and at least three days/week and is based on an individualized treatment plan), including assessment, counseling, CI and activity therapies or education (licensed and unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level** (Level II.1)	Per 15 min.	\$16.17

HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H0015	HN/HO	HQ	Alcohol and/or drug services, intensive outpatient (treatment program that operates at least three hours/day and at least three days/week and is based on an individualized treatment plan), including assessment, counseling, CI and activity therapies or education (licensed and unlicensed individual under supervision of a licensed clinician) **with a modifier for degree level**(Level II.1)	Per 15 min.	\$2.31 per person
H0019	HF	HB	BH, long-term residential (nonmedical, nonacute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem (Adult only Level III.3)	Per diem	\$83.50
H0019	HW	HF	BH, long-term residential (nonmedical, nonacute care in a residential treatment program where stay is typically longer than 30 days), room and board, per diem (Adult only Level III.3)	Per diem (room and board)	\$21.50
H2034	HA		Alcohol and/or drug abuse, halfway house services, per diem (Level III.1) HA- Child Adolsecent Program	Per diem (medical portion)	\$60.15
H2034	HW	HA	Alcohol and/or drug abuse, halfway house services, per diem (Level III.1)Note: MMIS will not accept as encounter data.	Per diem (room and board)	\$72.93
H2034	HB		Alcohol and/or drug abuse, halfway house services (Adult only Level III.1)	Per diem (medical portion)	\$70.30

HCPCS Code	Modifier		Description	Units	Rate per unit
	(1)	(2)			
H2034	HW	HB	Alcohol and/or drug abuse, halfway house services (Adult only Level III.1)	Per diem (room and board)	\$14.70
H2036	HA		Alcohol and/or drug treatment program, per diem (Level III.5) HA-Child Adolsecent Program	Per diem (medical portion)	\$212.56
H2036	HW	HA	Alcohol and/or drug treatment program, per diem (Level III.5) Note: MMIS will not accept as encounter data	Per diem (room and board)	\$85.91
H2036	HB		Alcohol and/or drug treatment program, per diem (Adult only Level III.5)	Per diem (medical portion)	\$128.38
H2036	HW	HB	Alcohol and/or drug treatment program, per diem (Adult only Level III.5)	Per diem (room and board)	\$31.62
H2036	TG	HB	Alcohol and/or drug treatment program, per diem (Adult only Level III.7)	Per diem (medical portion)	\$137.74

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
90791			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Psychiatric diagnostic evaluation	Per evaluation	\$124.24	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90834			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Psychotherapy, 45 minutes with patients and/or family member	Per evaluation	\$77.47	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90845			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Psychoanalysis	1 unit	\$71.67	MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90846			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Family psychotherapy, without the patient present,	1 unit	\$75.63	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90847			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Family psychotherapy , conjoint psychotherapy with patient present	Per evaluation	\$92.79	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 				80% of physician rate. Must have admitting privileges to use this code in hospitals.
90849			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Multiple-family group psychotherapy	Per evaluation	\$26.88	APRNs, MPs and licensed psychologist may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90853			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Group psychotherapy, other than of a multiple-family group)	Per evaluation	\$25.96	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90785			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Interactive complexity (List separately in addition to the code for primary care procedure) (Use 90785 in conjunction with codes for diagnostic psychiatric evaluation [90791, 90792], psychotherapy [90832, 90834, 90837],	per evaluation	\$3.44	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	psychotherapy when performed with an evaluation and management services [90833, 90836, 90838, 99201-99255, 99304-99337, 99341-99350 and group psychotherapy [90853]]. (Do not report 90785 in conjunction with 90839, 90840, or in conjunction with E/M services when no psychotherapy service is also reported).			
90792			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	per evaluation	\$115.62	<p>The SMO must ensure that practitioner is trained to use equipment and play therapy.</p> <p>The Association for Play Therapy (a4pt.org) has a credentialing protocol for Registered Play Therapist (RPT) and Registered Play Therapist Supervisors (RPT-S).</p> <p>Note: only licensed practitioners not registered practitioners are permitted to bill this code.</p> <p>Note: For all practitioners, appropriate experience/ training/ certification in child interactive/ play therapy should be required) “as certified or trained in specific modality”</p>
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1. Medical Psychologist 2. APRN		\$92.50	
			PT 70 EPSDT (School Board) PS 44 Public Health	Psychiatric diagnostic evaluation with medical services			
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i))				
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health				
			PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group				
			PT 38 School Based Health Center PS 70 Clinic Group				
			PT 73 Social Worker (Licensed / Clinical) PS				
			PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i)) PS 56 LPC				

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A				
90832			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	per evaluation	\$47.65	For the LBHP, recipient must be present. LMHPs will use this code for attendance at CFT meetings for CSoC members. LMHPs attending child and family team meetings for the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required for Medicaid.
			PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC	1. Medical Psychologist 2. Licensed Psychologist 3. APRN		\$38.12	
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health	1.LCSW 2.LPC 3.LMFT 4.LAC		\$33.36	
			PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor	Psychotherapy, 30 minutes with patient and/or family member LAC uses HF modifiers HF = substance abuse program			
			PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A				

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.				
+90833			PT 77 Mental Health Rehab PS 78 MHR	.Psychiatrist	per evaluation	\$30.24	For the LBHP, recipient must be present.
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	1.Medical Psychologist 2.APRN		\$24.19	
			PT 74 Mental Health Clinic PS 70 Clinic / Group	Psychotherapy, 30 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)(Use 90833 in conjunction with 99201-99215)			
			PT 70 EPSDT (School Board) PS 44 Public Health				
			PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group				
+90836			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	per evaluation	\$49.13	For the LBHP, recipient must be present.
				Psychotherapy, 45 minutes with patient and/or family member when			

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			PT 74 Mental Health Clinics PS 70 Clinic / Group PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	patient and/or family member when performed with an evaluation and management services (List separately in addition to the code for primary procedure)(Use 90836 in conjunction with 99201-99215)			
90837	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist 3. APRN 1, LCSW 2. LPC 3. LMFT Psychotherapy, 60 minutes with patient and/or family member	per evaluation	\$98.78 \$79.03 \$69.14	Comments from above are applied. For the LBHP, recipient must be present. LMHPs will use this code for attendance at CFT meetings for CSoC members. LMHPs attending child and family team meetings for the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required for

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.				Medicaid.
+90838			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	per evaluation	\$79.31	For the LBHP, recipient must be present.
			PT 31 Medical Psychologist State Plan Services (EPSDT and 1915(i)	1,Medical Psychologist 2,APRN		\$63.45	
				Psychotherapy, 60 minutes with			

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			PT 74 Mental Health Clinics PS 70 Clinic PT 70 EPSDT (School Board) PS 44 PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation PT 68 Substance Abuse & Alcohol PT 38 School Based Health Center PS 70 Clinic / Group	patient and/or family member when performed with an evaluation and management services (List separately in addition to the code for primary procedure)(Use 90833 in conjunction with 99201-99215)			
+90863			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Pharmacologic management, including prescription, use and review of medication, with no more than minimal medical psychotherapy. (List separately in addition to the code for primary procedure)	Per evaluation	\$43.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	<p>(Use 90863 in conjunction with 90832, 90834, 90837)</p> <p>(For pharmacologic management with psychotherapy services performed by a physician or other qualified health care professional who may report evaluation and management codes, use the appropriate evaluation and management codes 99201-99255, 99281-99285, 99304-99337, 99341-99350 and the appropriate psychotherapy with evaluation and management services 90833-90836, 90838)</p> <p>(Do not count time spent on providing pharmacologic management services in the time used for selection of the psychotherapy service)</p>			90862 has been deleted in CPT 2013. Psychiatrists should use the appropriate E/M series code (99xxx) to report this service. A new add-on code – 90863 – has been added to describe pharmacologic management when performed by a prescribing psychologist; Physicians should NEVER use 90863.
90870			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P <hr/> <ul style="list-style-type: none"> ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Electroconvulsive therapy (includes necessary monitoring)	Per evaluation	\$114.89	
90875			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P <hr/> <ul style="list-style-type: none"> ▪ PT 60 PS 86 Public private indicator ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Individual psycho-physiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior-modifying or supportive psychotherapy); 30 minutes	Per evaluation	\$40.71	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90876			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Individual psycho-physiological therapy	Per	\$63.36	Psychologist/MPs may use these codes

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior-modifying or supportive psychotherapy); 45 minutes	evaluation		for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
90880			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Hypnotherapy	Per evaluation	\$95.58	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96101			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology (e.g., MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report.	Per evaluation	\$75.51	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96102			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI, and WAIS), with qualified health care professional interpretation and report. administered by technician. per	Per evaluation	\$34.79	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 	<ul style="list-style-type: none"> report, administered by technician, per hour of technician time, face-to-face. 			
96103			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	<ul style="list-style-type: none"> Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI), administered by a computer, with qualified health care professional interpretation and report. 	Per evaluation	\$31.63	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96105			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	<ul style="list-style-type: none"> Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling, writing e.g., by Boston Diagnostic Aphasia Examination) with interpretation and report, per hour 	Per evaluation	\$59.32	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96116			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	<ul style="list-style-type: none"> Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment – e.g., acquired knowledge, attention, language, memory, planning and problem solving and visual spatial abilities), per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report, 	Per evaluation	\$85.33	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96118			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	<ul style="list-style-type: none"> Neuropsychological testing (e.g., Halstead-Reitan Neuropsychological 	Per evaluation	\$99.50	Psychologist/MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Battery, Wechsler Memory Scales and Wisconsin Card Scoring Test), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report.			80% of physician rate. Must have admitting privileges to use this code in hospitals.
96119			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Neuropsychological testing (eg, Halstead-Reitan Neuropsychological Battery, Weschler Memory Scales and Wisconsin Card Sorting Test), with qualified healthcare professional interpretation and report, administered by technician, per hour of technician time, face-to-face.	Per evaluation	\$50.08	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96120			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Neuropsychological testing (eg, Wisconsin Card Sorting Test), administered by computer, with qualified healthcare professional interpretation and report.	Per evaluation	\$46.15	Psychologist/MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96150			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient, initial assessment	Per evaluation	\$24.91	These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 	Initial assessment			APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
96151			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient, re-assessment	Per evaluation	\$24.21	<p>These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.</p> <p>APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.</p>
96152			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Health and behavior intervention, each 15 minutes, face-to-face; individual	Per evaluation	\$23.19	<p>These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.</p> <p>APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.</p>
96153			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Health and behavior intervention, each 15 minutes, face-to-face; group (2 or more patients)	Per evaluation	\$5.15	These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 				APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
96154			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Health and behavior intervention, each 15 minutes, face-to-face; family (without the patient present)	Per evaluation	\$22.53	<p>These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.</p> <p>APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.</p>
96155			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator PT 60 PS 86 URI 3 Sole Community Hospital 	Health and behavior intervention, each 15 minutes, face-to-face; family (without the patient present)	Per evaluation	\$21.86	<p>These apply to assessment and re-assessment of psychological/ emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequelae of cancer; etc.</p> <p>APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.</p>
99201			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of a new	Per evaluation	\$27.24	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, spend 10 minutes are spent face-to-face with the patient and/or family.			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99202			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded focused history; An expanded focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, spend 20 minutes are spent face-to-face with the patient and/or family.	Per evaluation	\$27.24	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99203			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of a new	Per evaluation	\$31.36	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, spend 30 minutes are spent face-to-face with the patient and/or family.			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99204			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 45 minutes are spent face-to-face with the patient and/or family.	Per evaluation	\$47.04	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99205			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history;	Per evaluation	\$47.04	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.			hospitals.
99211			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.	Per evaluation	\$12.23	(Restricted to females, ages 19-44). APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99212			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of	Per evaluation	\$27.24	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.			admitting privileges to use this code in hospitals.
99213			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: An expanded problem-focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family.	Per evaluation	\$31.16	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
99214			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.	Per evaluation	\$47.04	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99215			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P 	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.	Per evaluation	\$47.04	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
99218			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Initial observation care, per day, for the evaluation and management of a patient which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to "observation status" are of low severity. Typically, 30 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$53.79	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99219			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Initial observation care, per day, for the evaluation and management of a patient which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to "observation status" are of moderate severity. Typically, 50 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$88.99	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
99220			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Initial observation care, per day, for the evaluation and management of a patient which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to "observation status" are of high severity. Typically, 70 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$125.35	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99221			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Typically, 30 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$74.01	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99222			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Initial hospital care, per day, for the evaluation and management of a	Per evaluation	\$103.40	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 URI 2 Rural Hospital O/P ▪ PT 60 PS 86 PPI 7 State Hospital O/P ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	<p>patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Typically 50 minutes are spent at the bedside and on the patient's hospital floor or unit.</p>			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99223			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	<p>Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Typically, 70 minutes are spent at the bedside and on the patient's hospital floor or unit.</p>	Per evaluation	\$150.95	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99231			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	<p>Subsequent hospital care, per day, for the evaluation and management of a</p>	Per evaluation	\$30.92	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	<p>patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering or improving. Typically, 15 minutes are spent at the bedside and on the patient's hospital floor or unit.</p>			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99232			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	<p>Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Typically, 25 minutes are spent at the bedside and on the patient's hospital floor or unit.</p>	Per evaluation	\$55.33	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99233			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	<p>Subsequent hospital care, per day, for the evaluation and management of a</p>	Per evaluation	\$79.15	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	patient, which requires at least 2 of these 3 key components: A detailed interval history; a detailed examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant complication or a significant new problem. Typically, 35 minutes are spent at the bedside and on the patient's hospital floor or unit.			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99234			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Observation or inpatient hospital care, for the evaluation and management of a patient, including admission and discharge on the same date, which requires these 3 key components: A detailed or comprehensive history; a detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) requiring admission are of low severity. Typically, 40 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$108.23	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99235			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Observation or inpatient hospital care, for the evaluation and management of a	Per evaluation	\$148.44	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	patient, including admission and discharge on the same date, which requires these 3 key components: A comprehensive history; a comprehensive examination; and medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) requiring admission are of moderate severity. Typically, 50 minutes are spent at the bedside and on the patient's hospital floor or unit.			80% of physician rate. Must have admitting privileges to use this code in hospitals.
99236			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Observation or inpatient hospital care, for the evaluation and management of a patient, including admission and discharge on the same date, which requires these 3 key components: A comprehensive history; a comprehensive examination; and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) requiring admission are of high severity. Typically, 55 minutes are spent at the bedside and on the patient's hospital floor or unit.	Per evaluation	\$179.05	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99238			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P 	Hospital discharge day management; 30 minutes or less	Per evaluation	\$56.33	APRNs and MPs may use these codes for hospital services. Rate per unit =

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 				80% of physician rate. Must have admitting privileges to use this code in hospitals.
99239			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Hospital discharge day management; more than 30 minutes	Per evaluation	\$81.64	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99281			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Emergency department visit for the evaluation and management of a patient, which requires these three key components: a problem-focused history, a problem-focused examination and straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/of family's needs. Usually, the presenting problem(s) are self-limited or minor.	Per evaluation	\$16.96	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99282			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Emergency department visit for the evaluation and management of a patient, which requires these three key components: an expanded problem-focused history, an expanded problem-focused examination and medical	Per evaluation	\$32.71	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	decision-making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/of family's needs. Usually, the presenting problem(s) are of low to moderate severity.			
99283			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Emergency department visit for the evaluation and management of a patient, which requires these three key components: an expanded problem-focused history, an expanded problem-focused examination and medical decision-making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/of family's needs. Usually, the presenting problem(s) are of moderate severity.	Per evaluation	\$53.15	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99284			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Acute Care Hospital O/P ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Emergency department visit for the evaluation and management of a patient, which requires these three key components: a detailed history, a detailed examination and medical decision-making of moderate	Per evaluation	\$97.01	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 	complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/of family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the physician but do not pose an immediate significant threat to life or physiologic function.			
99285			<ul style="list-style-type: none"> PT 60 PS 86 Acute Care Hospital O/P PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Emergency department visit for the evaluation and management of a patient, which requires these three key components within the constraints imposed by the urgency of the patient's clinical condition and/or mental status: a comprehensive history, a comprehensive examination and medical decision-making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/of family's needs. Usually, the presenting problem(s) are of high severity and pose an immediate significant threat to life or physiologic function.	Per evaluation	\$145.35	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate. Must have admitting privileges to use this code in hospitals.
99201			<ul style="list-style-type: none"> PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a problem-focused history, a problem-focused examination, straightforward medical decision-making. Counseling and/or coordination	Per evaluation	\$33.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.			
99202			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: an expanded problem-focused history, an expanded problem-focused examination, straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family.	Per evaluation	\$33.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
99203			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a detailed history, a detailed examination, medical decision-making of low complexity. Counseling	Per evaluation	\$38.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.			
99204			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a comprehensive history, a comprehensive examination, medical decision-making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family.	Per evaluation	\$57.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
99205			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a comprehensive history, a comprehensive examination, medical decision-making of high complexity. Counseling and/or coordination of care	Per evaluation	\$57.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
				with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.			
99211			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician. Usually, the presenting problem(s) are minimal. Typically, five minutes are spent performing or supervising these services.	Per evaluation	\$33.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
99212			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT ▪ PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of an established patient, which requires two of these three key components: a problem-focused history, a problem-focused examination, straightforward medical decision-making. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are self-limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.	Per evaluation	\$33.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
99213			<ul style="list-style-type: none"> ▪ PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P ▪ PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Office or other outpatient visit for the evaluation and management of an established patient, which requires two of these three key components: an expanded problem-focused history, an	Per evaluation	\$38.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 	expanded problem-focused examination, medical decision-making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.			
99214			<ul style="list-style-type: none"> PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT PT 60 PS 86 URI 3 Sole Community Hospital 	Office or other outpatient visit for the evaluation and management of an established patient, which requires two of these three key components: a detailed history, a detailed examination, medical decision-making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.	Per evaluation	\$57.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.
99215			<ul style="list-style-type: none"> PT 60 PS 86 Urban Rural Indicator (URI) 2 Rural Hospital O/P PT 60 PS 86 Public private indicator (PPI) 7 State Hospital O/P PT 	Office or other outpatient visit for the evaluation and management of an established patient, which requires two of these three key components: a comprehensive history, a	Per evaluation	\$57.00	APRNs and MPs may use these codes for hospital services. Rate per unit = 80% of physician rate.

2013 CPT/HCPCS Code	Modifier		Type of Service	Description	Units	Rate per unit	Comments
	(1)	(2)					
			<ul style="list-style-type: none"> PT 60 PS 86 URI 3 Sole Community Hospital 	comprehensive examination, medical decision-making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.			

Outpatient and Inpatient Hospital (continued)

Reimbursement and Coding Summary					
HCPCS Code	Modifier		Description	Units	Rate Per Unit
	(1)	(2)			
			Inpatient Treatment (Claim Category of Service 01) Service provider type – '69' for Distinct Participating psychiatric units or primary diagnoses between 290.xx and 319.xx or (Claim Category of Service 02) Inpatient service in mental hospital for under age 22 or over age 65 Revenue codes 0114, 0124, 0134, 0144, 0154, 0202		
			Acute detoxification (Revenue codes of 116, 126, 136, 146, 156, as well as 202 and 204, with DT diagnoses to accommodate for DT)		
			Outpatient/emergency room (Claim Category of Service 08) outpatient hospital services and 13 rehabilitation services – all claims with primary diagnosis between 290.xx and 319.xx		
			Outpatient/emergency room (Claim Category of Service 07) physician services – all claims with primary diagnosis between 290.xx and 319.xx. Place of Service = 23, procedure codes 99281 – 99285 and revenue codes 450, 459, or 981		

Psychiatric Residential Treatment Facility (PRTF)

Modifiers- TG (Complex/high tech level of care) HF (Substance abuse program)					
Reimbursement and Coding Summary					
HCPCS Code	Modifier		Description	Units	Interim Rate Per Unit
	(1)	(2)			
H2013	TG		Psychiatric health facility service, per diem (Specialized) TG = Complex high tech level of care	Per diem	\$335.49
H2013			Psychiatric health facility service, per diem	Per diem	\$335.49
H2013	TG	HF	Psychiatric health facility service, per diem (Level III.7) TG = Complex high tech level of care HF = Substance abuse	Per diem	\$335.49
H0011	TG		Alcohol and/or drug services; acute detoxification (residential addiction program inpatient) TG = Complex high tech level of care (Level III.7D)	Per diem	\$335.49

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
J3490	TH			Psychiatrist	Unclassified Drugs (17P 250 mg IM) Unclassified drugs TH = Obstetrical treatment/services, prenatal or postpartum	1 unit	\$19.71	Females age over 10
H0049				Psychiatrist 1. Medical Psychologist 2. APRN	Alcohol and/or drug screening	15 minutes	\$14.78 \$11.82	
H0050			PT 19/20 Physician	Psychiatrist 1. Medical Psychologist 2. APRN	Alcohol and/or drug services, brief intervention, per 15 minutes	15 minutes	\$34.5 \$27.60	
+90785			PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i)) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i)) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist 3. APRN	Interactive complexity (List separately in addition to the code for primary procedure) (Use 90785 in conjunction with codes for diagnostic psychiatric evaluation [90791, 90792], psychotherapy [90832, 90834, 90837], psychotherapy when performed with an evaluation and management service [90833, 90836, 90838, 99201-99255, 99304-99337, 99341-99350], and group psychotherapy [90853])	1 unit	\$3.44 \$2.75	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
				1.LCSW 2. LPC 3.LMFT 4.LAC	(Do not report 90785 in conjunction with 90839, 90840, or in conjunction with E/M services when no psychotherapy service is also reported)		\$2.41	
90791	GC		PT 77 Mental Health Rehab PS 78 Mental Health Rehab (MHR) PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC) PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoc/ Behavioral Health PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed/Clinical) PS PT Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i)) PS 56 LPC GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist Medical Psychologist Licensed Psychologist APRN LCSW LPC LMFT	Psychiatric diagnostic evaluation	Per evaluation	\$108.39 \$86.71 \$75.86	LMFTs and LACs are not permitted to render diagnosis of mental, emotional or addictive disorders but may perform assessments within their scope of practice.

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
90792			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Psychiatric diagnostic evaluation with medical services		\$115.62	The SMO must ensure that practitioner is trained to use equipment and play therapy.
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1. Medical Psychologist 2. APRN			\$92.50	
			PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i)) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					The Association for Play Therapy (a4pt.org) has a credentialing protocol for Registered Play Therapist (RPT) and Registered Play Therapist Supervisors (RPT-S). Note: only licensed practitioners not registered practitioners are permitted to bill this code. Note: For all practitioners, appropriate experience/ training/ certification in child interactive/ play therapy should be required) "as certified or trained in specific modality"
90832			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Psychotherapy, 30 minutes with patient and/or family member	Per session	\$47.65	For the LBHP, recipient must be present. LMHPs will use this code for attendance at CFT meetings for CSoC members. LMHPs attending child and family team meetings for
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1. Medical Psychologist 2. Licensed Psychologist 3. APRN			\$38.12	
			PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC		LAC uses HF modifiers HF = substance abuse program			

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	1.LCSW 2.LPC 3.LMFT 4.LAC			\$33.36	the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required for Medicaid.
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health					
			PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group					
			PT 38 School Based Health Center PS 70 Clinic / Group					
			PT 73 Social Worker (Licensed / Clinical) PS					
			PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i) PS 56 LPC					
			PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health					
			GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					
+90833			PT 77 Mental Health Rehab PS 78 MHR	.Psychiatrist	Psychotherapy, 30 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)	Per session	\$30.24	For the LBHP, recipient must be present.
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	1.Medical Psychologist 2.APRN			\$24.19	
			PT 74 Mental Health Clinic PS 70 Clinic / Group					
			PT 70 EPSDT (School Board) PS 44 Public Health					
			PT 18 Community Mental Health Center PS 5H CMHC					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health		(Use 90833 in conjunction with 99201-99215)			
			PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group					

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 38 School Based Health Center PS 70 Clinic / Group					
90834	GC		PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Psychotherapy, 45 minutes with patient and/or family member	Per session	\$67.08	Comments from above are applied. For the LBHP, recipient must be present.
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1. Medical Psychologist 2. Licensed Psychologist 3. APRN			\$53.66	
			PT 70 EPSDT (School Board) PS 44 Public Health	1. LCSW 2. LPC 3. LAC 4. LMHP	LAC uses HF modifiers	\$46.95	LMHPs will use this code for attendance at CFT meetings for CSoC members.	
			PT 18 Community Mental Health Center PS 5H CMHC				LMHPs attending child and family team meetings for the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required for Medicaid.	
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i) PS					
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health					
			PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group					
			PT 38 School Based Health Center PS 70 Clinic / Group					
	PT 73 Social Worker (Licensed / Clinical) PS							
		PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i)						
		PS 56 LPC						
		PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A						
		PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health						
		GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.						
+90836			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Psychotherapy, 45 minutes with patient and/or family member	Per session	\$49.13	For the LBHP, recipient must be present.

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	1.Medical Psychologist 2.APRN	when performed with an evaluation and management services (List separately in addition to the code for primary procedure) (Use 90836 in conjunction with 99201-99215)		\$39.30	
90837	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS	Psychiatrist 1.Medical Psychologist 2.Licensed Psychologist 3.APRN 1,LCSW 2. LPC 3.LMFT 4.LAC	Psychotherapy, 60 minutes with patient and/or family member	Per session	\$98.78 \$79.02 \$69.14	Comments from above are applied. For the LBHP, recipient must be present. LMHPs will use this code for attendance at CFT meetings for CSoC members. LMHPs attending child and family team meetings for the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required for Medicaid.

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					
+90838			PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Psychotherapy, 60 minutes with patient and/or family member when performed with an evaluation and management services (List separately in addition to the code for primary procedure) (Use 90833 in conjunction with 99201-99215)	Per session	\$79.31	For the LBHP, recipient must be present.
			PT 31 Medical Psychologist State Plan Services (EPSDT and 1915(i)	1, Medical Psychologist 2. APRN			\$63.45	
			PT 74 Mental Health Clinics PS 70 Clinic / Group					
			PT 70 EPSDT (School Board) PS 44 Public Health					
			PT 18 Community Mental Health Center PS 5H CMHC					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health					
			PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group					
PT 38 School Based Health Center PS 70 Clinic / Group								
90839	GC		PT 77 Mental Health Rehab PS 78 Mental Health Rehab (MHR)	Psychiatrist	Psychotherapy for crisis; first 60 minutes	Per session	\$123.60	LMFTs and LACs are not permitted to render diagnosis of mental, emotional or addictive disorders but may perform assessments within their
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1,Medical Psychologist 2,Licensed Psychologist 3.APRN			\$98.88	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 70 EPSDT (School Board) PS 44 Public Health	1.LCSW 2.LPC 3.LAC 4.LMFT			\$86.52	scope of practice.
			PT 18 Community Mental Health Center PS 5H CMHC)					
			PT 31					
			Psychologist State Plan Services (EPSDT and 1915(i))					
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health					
			PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group					
			PT 38 School Based Health Center PS 70 Clinic / Group					
			PT 73 Social Worker (Licensed/Clinical) PS					
			PT Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i))					
			PS 56 LPC					
			PT AH Licensed Marriage & Family Therapists (LMFTs) State Plan Services (EPSDT and 1915(i))					
			PS 8A					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health					
			GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					
+90840	GC		PT 77 Mental Health Rehab PS 78 Mental Health	Psychiatrist	Psychotherapy for crisis; each additional 60 minutes (List separately in addition to code for primary service)	Per session	\$61.50	LMFTs and LACs are not permitted to render diagnosis of mental, emotional or addictive disorders but may perform assessments within their scope of practice.
			PT 74 Mental Health Clinic PS 70 Clinic / Group	1.Medical Psychologist 2.Licensed Psychologist 3.APRN			\$49.20	
			PT 70 EPSDT (School Board) PS 44 Public Health					
			PT 18 Community Mental Health Center PS 5H		(Use 90840 in conjunction with 90839)			
			PT 31	1.LCSW	(Do not report 90839,		43.05	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			Psychologist State Plan Services (EPSDT and PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse and Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed/Clinical) PS PT Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i)) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFTs) State Plan Services (EPSDT and 1915(i)) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	2.LPC 3.LAC 4.LMFT	90840 in conjunction with 90791, 90792, psychotherapy codes 90832-90838 or other psychiatric services, or 90785-90899)			
90845	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic/Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. APRN	Psychoanalysis	Per evaluation	\$58.98 \$47.18	
90846	GC	AH HO	PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Family psychotherapy (without the patient)	Per session	\$62.62	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
		HF	PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i)) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS PT AJ Licensed Addiction Counselor (LAC) State Plan Services (EPSDT and 1915(i)) PS A9	1. Medical Psychologist 2. Licensed Psychologist 3. APRN	present) LAC uses HF modifiers		\$50.09	
				1. LCSW 2. LPC 3. LMFT 4. LAC	HF = substance abuse program		\$46.79	
90847	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinic PS 70 Clinic / Group Practice PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist 3. APRN 1. LCSW 2. LPC	Family psychotherapy (conjoint psychotherapy) (with LAC uses HF modifiers HF = substance abuse program	Per session	\$77.67 \$62.13 \$54.37	LMHPs will use this code for attendance at CFT meetings for CSoC members. LMHPs attending child and family team meetings for the purposes of developing a treatment plan may bill for their participation time when the client/guardian is in attendance at the meeting and the development of the treatment plan is required

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT AG Behavioral Health Rehabilitation Provider Agency PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State Plan Services (EPSDT and 1915(i) PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT AJ Licensed Addiction Counselor (LAC) State Plan Services (EPSDT and 1915(i) PS A9 GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					treatment plan is required for Medicaid.
90849			PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic/Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist 3. APRN	Multiple-family group psychotherapy	Per evaluation	\$23.23 \$18.58	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
90853	GC		PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Group psychotherapy (other than of a multiple- family group)	Per session	\$22.05	
			PT 74 Mental Health Clinic PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health	1.Medical Psychologist 2.Licensed Psychologist 3.APRN	(Use 90853 in conjunction with 90785 for the specified patient when group psychotherapy includes interactive complexity) LAC uses HF modifiers		\$17.64	
			PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Provider PT 68 Substance Abuse & Alcohol Abuse Center PS	1.LCSW 2.LPC 3.LAC 4.LMFT	HF = substance abuse program		\$15.43	
			PT 38 School Based Health Center PS 70 Clinic / Group PT 73 Social Worker (Licensed / Clinical) PS PT AK Licensed Professional Counselor (LPC) State PS 56 LPC PT AH Licensed Marriage & Family Therapists (LMFT) State Plan Services (EPSDT and 1915(i)) PS 8A PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health PT AJ Licensed Addiction Counselor (LAC) State Plan Services (EPSDT and 1915(i)) PS A9 GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
+90863			PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	Psychiatrist 1. Medical Psychologist 2. APRN	(List separately in addition to the code for primary procedure) (Use 90863 in conjunction with 90832, 90834, 90837) (For pharmacologic management with psychotherapy services performed by a physician or other qualified health care professional who may report evaluation and management codes, use the appropriate evaluation and management codes 99201-99215, 99281-99285, 99304-99337, 99341-99350 and the appropriate psychotherapy with evaluation and management services	Per session	\$38.91 \$31.13	
90870				Psychiatrist Note. Med Psychologist and APRNs are not allowed to bill for this service unless Magellan has supporting documentation that allows both practitioners to deliver this service within their scope of practice.	Electroconvulsive therapy (includes necessary monitoring)	Per treatment	94.84 \$75.87	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
90875			PT 19/20 Physician		Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 30 minutes.	Per evaluation	\$50.05	
90876			PT 19/20 Physician		Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 45 minutes.	Per evaluation	\$74.34	
90880			PT 19/20 Physician	Psychiatrist 1.Medical Psychologist 2.APRN	Hypnotherapy	Per treatment	\$75.96 \$60.77	
96101	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC	Psychiatrist 1.Medical Psychologist 2.Licensed Psychologist	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., Minnesota Multiphasic Personality Inventory (MMPI), Beckman, Wechsler	Per hour	\$60.84 \$48.67	The SMO must ensure that any psychiatrists are trained and credentialed in this area.

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.		Rorschach, Wechsler Adult Intelligence Scale (WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report			
96102	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i)) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	1.Psychiatrist 2.Medical Psychologist 3.Licensed Psychologist	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI, and WAIS), with qualified health care professional interpretation and report, administered by technician, per hour of technician time, face-to-face.	Per hour	\$34.79	
96103	GC		PT 77 Mental Health Rehab PS 78 MHR	1.Psychiatrist	Psychological testing (includes psychodiagnostic	Per test	\$31.63	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	2. Medical Psychologist 3. Licensed Psychologist	assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI), administered by a computer, with qualified health care professional interpretation and report			
96105	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic/Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist	Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling, writing, e.g., by Boston Diagnostic Aphasia Examination) with interpretation and report, per hour.	1 unit	\$47.82	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
96116	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic/Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist	Neuropsychological status exam (clinical assessment of thinking, reasoning and judgment, e.g., acquired knowledge, attention, language, memory, planning and problem solving and visual spatial abilities), per hour of the psychologist's or physician's time, both face-to face time with the patient and time interpreting test results and preparing the report.	1 unit	\$68.14	
96118	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist	Neuropsychological testing (e.g., Halstead- Reitan Neuropsychological Battery, Wechsler Memory Scales and Wisconsin Card Scoring Test), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report	Per Test	\$76.33 \$61.07	Neuropsychological testing by technician and computer needs to be included.

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					
96119	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	1.Psychiatrist 2.Medical Psychologist 3.Licensed Psychologist	Neuropsychological testing (eg, Halstead-Reitan Neuropsychological Battery, Weschler Memory Scales and Wisconsin Card Sorting Test), with qualified healthcare professional interpretation and report, administered by technician, per hour of technician time, face-to-face	Per Test	\$50.08 \$40.06	
96120	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i))	1.Psychiatrist 2.Medical Psychologist 3.Licensed Psychologist	Neuropsychological testing (eg, Wisconsin Card Sorting Test), administered by computer, with qualified healthcare professional interpretation and report.	Per Test	\$46.15 \$36.92	

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.					
96150	GC		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health/EPSDT PT 18 Community Mental Health Center PS 5H CMHC PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist 3. APRN	Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, physiological monitoring, health- oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment	15 minutes	\$13.10 \$10.48	These apply to assessment and re-assessment of psychological/emotional/ cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc.
96151	GC		PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Health and behavior	15 minutes	\$12.67	These apply to assessment

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	1. Medical Psychologist 2. Licensed Psychologist 3. APRN	assessment (e.g., health-focused clinical interview, behavioral observations, psycho-physiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; re-assessment.		\$10.14	and re-assessment of psychological/emotional/cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc. Psychologist codes are only available to children through EPSDT and not applicable through the 1915(i) population.
95152	GC		PT 77 Mental Health Rehab PS 78 MHR PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist	Health and behavior intervention, each 15 minutes, face-to-face; individual	15 minutes	\$12.06 \$9.65	These apply to assessment and re-assessment of psychological/emotional/cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc. Psychologist codes are only available to children through EPSDT and not applicable through the 1915(i) population.
96153	GC		PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Health and behavior intervention, each 15 minutes, face-to-face	15 minutes	2.89 \$2.31	These apply to assessment and re-assessment of psychological/emotional/co

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	1. Medical Psychologist 2. Licensed Psychologist	15 minutes, face to face, group (two or more patients)			Psychological/emotional/cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc. Psychologist codes are only available to children through EPSDT and not applicable through the 1915(i) population.
96154	GC		PT 77 Mental Health Rehab PS 78 MHR PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	Psychiatrist 1. Medical Psychologist 2. Licensed Psychologist	Health and behavior intervention, each 15 minutes, face-to-face; family (with the patient present)	15 minutes	\$11.85 \$9.48	These apply to assessment and re-assessment of psychological/emotional/cognitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc. Psychologist codes are only available to children through EPSDT and not applicable through the 1915(i) population.
96155	GC		PT 77 Mental Health Rehab PS 78 MHR	Psychiatrist	Health and behavior	15 minutes	\$12.76	These apply to assessment

2013 CPT/ HCPCS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist.	1. Medical Psychologist 2. Licensed Psycholoaist	intervention, each 15 minutes, face-to-face; family (without the patient present)		\$10.21	and re-assessment of psychological/emotional/co gnitive factors related to 'physical illness'. These are used if there is no psychiatric diagnosis; like working with TBIs in a rehab setting; or psychological sequel of cancer; etc. Psychologist codes are only available to children through EPSDT and not applicable through the 1915(i) population.
96372			PT 77 Mental Health Rehab PS 78 MHR PT 31 Psychologist State Plan Services (EPSDT and 1915(i)) PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) and Psychiatrist 1. Medical Psychologist PRN 2.	Therapeutic, prophylactic or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	1 Unit	\$21.68 \$16.26	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings.</i> <i>Medical psychologists (MPs) can order injections but may not administer them. The MP may hire a nurse for the offices to give the injections.</i>

Other Licensed Practioners (continued)

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
99201	TH		PT 77 Mental Health Rehab PS 78 MHR	Primary Care MD (GP, FP, Int. Med., Peds, etc.)	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to- face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$25.36 \$27.04 TH	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings. TH - Restricted to females, ages ten to 59. Include psychiatrists; include psychological and neuropsychological testing codes if there are competencies and training support for individual MD</i>
			PT 74 Mental Health Clinics PS 70 Clinic / Group. PT 70 EPSDT (School Board) PS 44 Public Health	1. Medical Psychologist 2. APRN			\$20.29	
			PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group					
99202	TH		PT 77 Mental Health Rehab PS 78 MHR	Primary Care MD (GP, FP, Int. Med., Peds, etc.)	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with	Per evaluation	\$44.08 \$47.01 TH	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings.</i>
			PT 74 Mental Health Clinics PS 70 Clinic /Group	1. Medical Psychologist 2. APRN			\$35.26	

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoc/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group		Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.			TH - Restricted to females ages 10 to 59. Include psychiatrists; include psychological and neuropsychological testing codes if there are competencies and training support for individual MD.
99203	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoc/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$64.08 \$68.35 TH \$51.26	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings.</i> TH - Restricted to females ages 10 to 59. Include psychiatrists; include psychological and neuropsychological testing

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 38 School Based Health Center PS 70 Clinic / Group					
99204	TH		PT 77 Mental Health Rehab PS 78 MHR	Primary Care MD (GP, FP, Int. Med., Peds, etc.)	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$99.52	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings. TH - Restricted to females ages 10 to 59 .</i>
			PT 74 Mental Health Clinics PS 70 Clinic / Group	1. Medical Psychologist 2. APRN			\$79.62	
			PT 70 EPSDT (School Board) PS 44 Public Health					
			PT 18 Community Mental Health Center PS 5H CMHC					
			PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(j) PS 8E CSoC/ Behavioral Health					Include psychiatrists; include psychological and neuropsychological testing codes if there are competencies and training support for individual MD.
			PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group					
			PT 38 School Based Health Center PS 70 Clinic / Group					
99205	TH		PT 77 Mental Health Rehab PS 78 MHR	Primary Care MD (GP, FP, Int. Med., Peds, etc.)	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive	Per evaluation	\$125.53 \$134.33 TH	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in</i>

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(j) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	1. Medical Psychologist 2. APRN	examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum		\$100.42	TH - Restricted to females ages 10 to 59. Include psychiatrists; include psychological and neuropsychological testing
99211	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(j) PS 8E CSoC/ Behavioral Health	Primary Care MD, GP, FP, Int Med, and Peds) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$12.73 \$13.78 TH \$10.18	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings.</i> TH- Restricted to females ages 10 to 59.

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group					
99212	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic / Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A problem-focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$27.29 \$27.29 TH \$21.83	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings. TH- Restricted to females ages 10 to 59.</i>
99213	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with	Per evaluation	\$42.80 \$45.65 TH \$34.24	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings.</i>

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(j) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group		Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum			
99214	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(j) PS 8E CSoC/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatments/services, prenatal or postpartum	Per evaluation	\$64.57 \$67.88 TH \$51.66	<i>Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings. TH- Restricted to females ages 10 to 59.</i>

2013 CPT/ HPCPS	Modifier		Provider Type and Specialty	Practitioner type	2013 Description	Units	Rate per unit	Comment
	(1)	(2)						
			PT 38 School Based Health Center PS 70 Clinic / Group					
99215	TH		PT 77 Mental Health Rehab PS 78 MHR PT 74 Mental Health Clinics PS 70 Clinic /Group PT 70 EPSDT (School Board) PS 44 Public Health PT 18 Community Mental Health Center PS 5H CMHC PT AG Behavioral Health Rehabilitation Agency (Atypical) State Plan Services (EPSDT and 1915(i) PS 8E CSoc/ Behavioral Health PT 68 Substance Abuse & Alcohol Abuse Center PS 70 Clinic / Group PT 38 School Based Health Center PS 70 Clinic / Group	Primary Care MD (GP, FP, Int. Med., Peds, etc.) 1. Medical Psychologist 2. APRN	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation	\$93.37 \$93.37 TH \$74.70	Note: These are "basic" and do not require behavioral health specialists. These are intended to be performed in PCP outpatient clinic settings. TH - Restricted to females ages 10-59.

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
H0049			PT 72 FQHC	Alcohol and/or drug screening Limited to 1 visit during pregnancy	15 minutes		
H0050			PT 72 FQHC	Alcohol and/or drug services, brief intervention, per 15 minutes Limited to 1 visit during pregnancy	15 minutes		
90785			PT 72 FQHC	Interactive complexity (List separately in addition to the code for primary procedure) (Use 90785 in conjunction with codes for diagnostic psychiatric evaluation [90791, 90792], psychotherapy [90832, 90834, 90837], psychotherapy when performed with an evaluation and management service [90833, 90836, 90838, 99201-99255, 99304-99337, 99341-99350], and group psychotherapy [90853]) (Do not report 90785 in conjunction with 90839, 90840, or in conjunction with E/M services when no psychotherapy service is also reported)	Per evaluation		
90791			PT 72 FQHC	Psychiatric diagnostic evaluation	Per evaluation		
90792			PT 72 FQHC	Psychiatric diagnostic evaluation with medical services (Do not report 90791 or 90792 in conjunction with 99201-99337, 99341-99350, 99366-99368, 99401-99444) (Use 90785 in conjunction with 90791, 90792 when the diagnostic evaluation includes interactive complexity services)	Per evaluation		
90832			PT 72 FQHC	Psychotherapy, 30 minutes with patient and/or family member	Per evaluation		
+90833			PT 72 FQHC	Psychotherapy, 30 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
				(Use 90833 in conjunction with 99201-99255, 99304-99337, 99341-99350)			
90834			PT 72 FQHC	Psychotherapy, 45 minutes with patient and/or family member	Per evaluation		
+90836			PT 72 FQHC	Psychotherapy, 45 minutes with patient and/or family member when performed with an evaluation and management services (List separately in addition to the code for primary procedure) (Use 90836 in conjunction with 99201-99255, 99304-99337, 99341-99350)	Per evaluation		
90837			PT 72 FQHC	Psychotherapy, 60 minutes with patient and/or family member (Use the appropriate prolonged service code [99345-99357] for psychotherapy services not performed with an E/M service of 90 minutes or longer face-to face with the patient)	Per evaluation		
+90838			PT 72 FQHC	Psychotherapy, 60 minutes with patient and/or family member when performed with an evaluation and management services (List separately in addition to the code for primary procedure) (Use 90838 in conjunction with 99201-99255, 99304-99337, 99341-99350) (Use 90785 in conjunction with 90832, 90833, 90834, 90836, 90837, 90838 when psychotherapy includes interactive complexity services)	Per evaluation		
90839			PT 72 FQHC	Psychotherapy for crisis; first 60 minutes	Per evaluation		
+90840			PT 72 FQHC	Psychotherapy for crisis; each additional 30 minutes (List separately in addition to code for primary service) (Use 90840 in conjunction with 90839) (Do not report 90839, 90840 in conjunction with 90791, 90792, psychotherapy codes 90832-90838 or other psychiatric services, or 90785-90899)	Per evaluation		
90845			PT 72 FQHC	Psychoanalysis	1 unit		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
90846			PT 72 FQHC	Family psychotherapy (without the patient present)	1 unit		
90847			PT 72 FQHC	Family psychotherapy (conjoint psychotherapy) (with patient present)	Per evaluation		
90849			PT 72 FQHC	Multiple-family group psychotherapy	Per evaluation		
90853			PT 72 FQHC	Group psychotherapy (other than of a multiple-family group) (Use 90853 in conjunction with 90785 for the specified patient when group psychotherapy includes interactive complexity) (Use 90863 in conjunction with 90832, 90834, 90837) (For pharmacologic management with psychotherapy services performed by a physician or other qualified health care professional who may report evaluation and management codes, use the appropriate evaluation and management codes 99201-99255, 99281-99285, 99304-99337, 99341-99350 and the appropriate psychotherapy with evaluation and management services 90833-90836, 90838) (Do not count time spent on providing pharmacologic management services in the time used for selection of the psychotherapy service)	Per evaluation		
90870			PT 72 FQHC	Electroconvulsive therapy (includes necessary monitoring)	Per evaluation		
90875			PT 72 FQHC	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 30 minutes.	Per evaluation		
90876			PT 72 FQHC	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 45 minutes.	Per evaluation		
90880			PT 72 FQHC	Hypnotherapy	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
96101			PT 72 FQHC	Psychological testing (includes psycho-diagnostic assessment of emotionality, intellectual abilities, personality and psychopathology (e.g., MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report.	1 unit		
96105			PT 72 FQHC	Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling, writing (e.g., by Boston Diagnostic Aphasia Examination), with interpretation and report, per hour.	1 unit		
96116			PT 72 FQHC	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment – e.g., acquired knowledge, attention, language, memory, planning and problem-solving and visual spatial abilities), per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report.	1 unit (Per hour)		
96118			PT 72 FQHC	Neuropsychological testing (e.g., Halstead-Reitan Neuropsychological Battery, Wechsler Memory Scales and Wisconsin Card Scoring Test), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report.	1 unit (Per hour)		Neuropsychological testing by technician and computer needs to be included.
96150			PT 72 FQHC	Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment.	Per evaluation (15 minutes)		
96151			PT 72 FQHC	Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; re-assessment.	Per evaluation (15 minutes)		
96152			PT 72 FQHC	Health and behavior intervention, each 15 minutes, face-to-face; individual.	Per evaluation (15 minutes)		
96152			PT 72 FQHC	Health and behavior intervention, each 15 minutes, face-to-face; group (two or more patients).	Per evaluation (15 minutes)		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
96154			PT 72 FQHC	Health and behavior intervention, each 15 minutes, face-to-face; family (with the patient present).	Per evaluation (15 minutes)		
96155			PT 72 FQHC	Health and behavior intervention, each 15 minutes, face-to-face; family (without the patient present).	Per evaluation (15 minutes)		
99201			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99201	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99202			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded focused history; An expanded focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 20 minutes are spent face-to-face with the patient and/or family.	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99202	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded focused history; An expanded focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians or other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 20 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99203			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99203	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99204			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 45 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99204	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 45 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		
99205			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99205	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99211			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.	Per evaluation		
99211	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99212			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99212	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99213			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99213	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)		2013 Description			
99214			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99214	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99215			PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99215	TH		PT 72 FQHC	Office or other outpatient visit for the evaluation and management of an established patient, which requires 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family. TH = Obstetrical treatment/services, prenatal or postpartum	Per evaluation		Restricted to females
99241			PT 72 FQHC	Office consultation for a new or established patient, which requires these 3 key components: A problem-focused history; A problem-focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 15 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99242			PT 72 FQHC	Office consultation for a new or established patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.	Per evaluation		

2013 CPT/ HCPCS	Modifier		Provider Type	FQHC 2013 Description	Units	Rate per unit *Contact Medicaid for facility specific rates	Comments
	(1)	(2)					
99243			PT 72 FQHC	Office consultation for a new or established patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision-making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99244			PT 72 FQHC	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.	Per evaluation		
99245			PT 72 FQHC	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided, consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 80 minutes are spent face-to-face with the patient and/or family.	Per evaluation		