### MYPAC BILLING INFORMATION

<table>
<thead>
<tr>
<th>MYPAC</th>
<th>Procedure Code</th>
<th>Required Procedure Code Modifier</th>
<th>Number of Units</th>
<th>Unit equals</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2022</td>
<td>HT</td>
<td>115</td>
<td>1 day</td>
<td>$347.74</td>
<td></td>
</tr>
</tbody>
</table>

**General**

- Prior authorization for MYPAC is issued for a 365 day period.
- Procedure Code H2022 will be certified for 115 units per year (This assumes services being delivered 3 times a week).
- A billable unit must consist of at least thirty (30) minutes face-to-face contact with the MYPAC participant, family, or a Child and Family Team member, for the purpose of the Individualized Service Plan (ISP) implementation.
- All billable contacts with a Child and Family team member, that do not include the MYPAC participant, will require the use of a 2nd modifier (HS). The number of billable contacts where the MYPAC participant is not present is limited to four (4) per month.
- Case management or respite codes will not be authorized in conjunction with MYPAC/IOP.
- No other mental health services will be authorized during MYPAC/IOP authorization.