

COMMUNITY/PRIVATE MENTAL HEALTH CENTERS FEE SCHEDULE Effective 7/01/2019

Print Date: 5/11/20

All Codes require the HW modifier. Price does not include cutbacks, assessment fees, etc. Payment is not guaranteed.

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| Code | Code Status | PA | Description | Min Age | Max Age | Begin Date | End Date | Max Units | Fee |
|-------|-------------|----|---|---------|---------|------------|------------|-----------|--------|
| 90785 | Fee on File | | INTERACTIVE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 13.08 |
| 90791 | Fee on File | | PSYCHIATRIC DIAGNOSTIC EVALUATION | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 120.64 |
| 90792 | Fee on File | | PSYCHIATRIC DIAGNOSTIC EVALUATION WITH MEDICAL SERVICES | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 134.42 |
| 90832 | Fee on File | | PSYCHOTHERAPY, 30 MINUTES WITH PATIENT | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 59.13 |
| 90833 | Fee on File | | PSYCHOTHERAPY, 30 MINUTES WITH PATIENT WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICE | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 60.78 |
| 90834 | Fee on File | | PSYCHOTHERAPY, 45 MINUTES WITH PATIENT | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 78.69 |
| 90836 | Fee on File | | PSYCHOTHERAPY, 45 MINUTES WITH PATIENT WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICE | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 76.98 |
| 90837 | Fee on File | | PSYCHOTHERAPY, 60 MINUTES WITH PATIENT | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 118.10 |
| 90838 | Fee on File | | PSYCHOTHERAPY, 60 MINUTES WITH PATIENT WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICE | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 101.60 |
| 90846 | Fee on File | | FAMILY PSYCHOTHERAPY (WITHOUT THE PATIENT PRESENT), 50 MINUTES | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 95.01 |
| 90847 | Fee on File | | FAMILY PSYCHOTHERAPY (CONJOINT PSYCHOTHERAPY)(WITH PATIENT PRESENT), 50 MINUTES | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 98.82 |
| 90849 | Fee on File | | MULTIPLE-FAMILY GROUP PSYCHOTHERAPY MULTIPLE-FAMILY GROUP PSYCHOTHERAPY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 35.18 |
| 90853 | Fee on File | | GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP) GROUP PSYCHO | 0 | 999 | 01/01/2020 | 12/31/9999 | 1 | 23.61 |
| 96127 | Fee on File | | BRIEF EMOTIONAL/BEHAVIORAL ASSESSMENT, WITH SCORING AND DOCUMENTATION, PER STANDARDIZED INSTRUMENT | 0 | 999 | 07/01/2019 | 12/31/9999 | 2 | 4.07 |
| 96130 | Fee on File | | PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF STANDARDIZED TEST RESULTS AND CLINICAL DATA, CLINICAL DECISION MAKING, TREATMENT PLANNING AND REPORT, AND INTERACTIVE FEEDBACK TO THE PATIENT, FAMILY MEMBER(S) OR | 0 | 999 | 01/01/2019 | 12/31/9999 | 1 | 102.29 |
| 96131 | Fee on File | | PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF STANDARDIZED TEST RESULTS AND CLINICAL DATA, CLINICAL DECISION MAKING, TREATMENT PLANNING AND REPORT, AND INTERACTIVE FEEDBACK TO THE PATIENT, FAMILY MEMBER(S) OR | 0 | 999 | 01/01/2019 | 12/31/9999 | 7 | 77.96 |

| Code | Code Status | PA | Description | Min Age | Max Age | Begin Date | End Date | Max Units | Fee |
|-------|-------------|-----|--|---------|---------|------------|------------|-----------|--------|
| 96136 | Fee on File | Yes | PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY METHOD; FIRST 30 | 0 | 999 | 03/25/2019 | 12/31/9999 | 1 | 39.37 |
| 96137 | Fee on File | Yes | PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY METHOD; EACH ADDITIONAL 30 MINUTES | 0 | 999 | 05/01/2020 | 12/31/9999 | 11 | 36.32 |
| 96372 | Fee on File | | THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); SUBCUTANEOUS OR INTRAMUSCULAR | 0 | 999 | 01/01/2020 | 12/31/9999 | 4 | 13.82 |
| 99201 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 37.61 |
| 99202 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 63.30 |
| 99203 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 89.78 |
| 99204 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 137.49 |
| 99205 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 173.22 |
| 99211 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN | 0 | 999 | 01/01/2020 | 12/31/9999 | 1 | 18.66 |
| 99212 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN | 0 | 999 | 07/01/2019 | 12/31/9999 | 2 | 37.22 |
| 99213 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN | 0 | 999 | 07/01/2019 | 12/31/9999 | 2 | 61.93 |
| 99214 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN | 0 | 999 | 07/01/2019 | 12/31/9999 | 2 | 91.05 |
| 99215 | Fee on File | | OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN | 0 | 999 | 05/01/2020 | 12/31/9999 | 1 | 122.16 |
| 99304 | Fee on File | | INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: DETAILED OR COMPREHENSIVE HISTORY; DETAILED OR COMPREHENSIVE EXAMINATION; AND MEDICAL DECISION MAKING THAT IS STRAIGHTFORWARD OR OF LOW COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 76.64 |
| 99305 | Fee on File | | INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: COMPREHENSIVE HISTORY; COMPREHENSIVE EXAMINATION; AND MEDICAL DECISION MAKING OF MODERATE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 110.88 |

| Code | Code Status | PA | Description | Min Age | Max Age | Begin Date | End Date | Max Units | Fee |
|-------|-------------|----|--|---------|---------|------------|------------|-----------|--------|
| 99306 | Fee on File | | INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: COMPREHENSIVE HISTORY; COMPREHENSIVE EXAMINATION; AND MEDICAL DECISION MAKING OF HIGH COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 142.45 |
| 99307 | Fee on File | | SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: PROBLEM FOCUSED INTERVAL HISTORY; PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 37.39 |
| 99308 | Fee on File | | SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: EXPANDED PROBLEM FOCUSED INTERVAL HISTORY; EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 58.34 |
| 99309 | Fee on File | | SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: DETAILED INTERVAL HISTORY; DETAILED EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 77.55 |
| 99310 | Fee on File | | SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: COMPREHENSIVE INTERVAL HISTORY; COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 115.11 |
| 99324 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR EVALUATION AND MANAGEMENT OF NEW PATIENT, WHICH REQUIRES THESE THREE KEY COMPONENTS: PROBLEM FOCUSED HISTORY; PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 47.14 |
| 99325 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE THREE KEY COMPONENTS: EXPANDED PROBLEM FOCUSED HISTORY; EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 68.56 |
| 99326 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE THREE KEY COMPONENTS: DETAILED HISTORY; DETAILED EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 118.95 |

| Code | Code Status | PA | Description | Min Age | Max Age | Begin Date | End Date | Max Units | Fee |
|-------|-------------|----|---|---------|---------|------------|------------|-----------|--------|
| 99327 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE THREE KEY COMPONENTS: COMPREHENSIVE HISTORY; COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 159.29 |
| 99328 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE THREE KEY COMPONENTS: COMPREHENSIVE HISTORY; COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 187.54 |
| 99334 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: PROBLEM FOCUSED INTERVAL HISTORY; PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 51.35 |
| 99335 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: EXPANDED PROBLEM FOCUSED INTERVAL HISTORY; EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 81.09 |
| 99336 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: DETAILED INTERVAL HISTORY; DETAILED EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 115.41 |
| 99337 | Fee on File | | DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: COMPREHENSIVE INTERVAL HISTORY; COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF MODERATE TO HIGH COMPLEXITY | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 165.56 |
| 99354 | Fee on File | | PROLONGED EVALUATION AND MANAGEMENT OR PSYCHOTHERAPY SERVICE(S) IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PATIENT CONTACT BEYOND THE USUAL SERVICE; FIRST HOUR | 0 | 999 | 07/01/2019 | 12/31/9999 | 1 | 110.79 |
| 99355 | Fee on File | | PROLONGED EVALUATION AND MANAGEMENT OR PSYCHOTHERAPY SERVICE(S) IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PATIENT CONTACT BEYOND THE USUAL SERVICE; EACH ADDITIONAL 30 | 0 | 999 | 01/01/2020 | 12/31/9999 | 4 | 84.53 |
| H0031 | Fee on File | | MENTAL HEALTH ASSESSMENT, BY NON-PHYSICIAN | 0 | 999 | 10/01/2003 | 12/31/9999 | 1 | 93.00 |

| Code | Code Status | PA | Description | Min Age | Max Age | Begin Date | End Date | Max Units | Fee |
|-------|-------------|-----|--|---------|---------|------------|------------|-----------|--------------------------------|
| H0032 | Fee on File | | MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN | 0 | 999 | 10/01/2003 | 12/31/9999 | 1 | 18.45 |
| H0035 | Fee on File | Yes | MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT, LESS THAN 24 HOURS | 0 | 999 | 10/01/2003 | 12/31/9999 | 1 | 113.00 |
| H0036 | Fee on File | | COMMUNITY PSYCHIATRIC SUPPORTIVE TREATMENT, FACE-TO-FACE, PER 15 MINUTES | 0 | 999 | 07/01/2012 | 12/31/9999 | 6 | 14.88 |
| H0038 | Fee on File | | SELF-HELP/PEER SERVICES, PER 15 MINUTES | 0 | 999 | 01/01/2012 | 12/31/9999 | 6 | 7.83 |
| H0039 | Fee on File | Yes | ASSERTIVE COMMUNITY TREATMENT, FACE-TO-FACE, PER 15 MINUTES | 0 | 999 | 07/01/2012 | 12/31/9999 | 40 | 27.50 |
| H2011 | Fee on File | | CRISIS INTERVENTION SERVICE, PER 15 MINUTES | 0 | 999 | 07/01/2012 | 12/31/9999 | 32 | 30.00 FTF 21.88 Phone |
| H2012 | Fee on File | Yes | BEHAVIORAL HEALTH DAYS TREATMENT, PER HOUR | 6 | 20 | 07/01/2014 | 12/31/9999 | 5 | 32.00 |
| H2021 | Fee on File | | COMMUNITY-BASED WRAP-AROUND SERVICES, PER 15 MINUTES | 0 | 20 | 07/01/2012 | 12/31/9999 | 16 | 14.88 |
| H2030 | Fee on File | Yes | MENTAL HEALTH CLUBHOUSE SERVICES, PER 15 MINUTES | 18 | 999 | 01/01/2012 | 12/31/9999 | 20 | 3.87 |
| S9480 | Fee on File | Yes | INTENSIVE OUTPATIENT PSYCHIATRIC SERVICES, PER DIEM | 0 | 20 | 01/01/2012 | 12/31/9999 | 1 | 122.54 |
| T1002 | Fee on File | | RN SERVICES, UP TO 15 MINUTES | 0 | 999 | 07/01/2005 | 12/31/9999 | 4 | 18.45 |
| T1017 | Fee on File | | TARGETED CASE MANAGEMENT, EACH 15 MINUTES | 0 | 999 | 03/01/2015 | 12/31/9999 | 8 | 14.88 |
| T1502 | Fee on File | | ADMINISTRATION OF ORAL, INTRAMUSCULAR AND/OR SUBCUTANEOUS MEDICATION BY | 0 | 999 | 10/01/2003 | 12/31/9999 | 2 | 4.76 |
| T2048 | Fee on File | Yes | BEHAVIORAL HEALTH, LONG-TERM CARE RESIDENTIAL (NON-ACUTE CARE IN A RESIDENTIAL T | 0 | 999 | 01/01/2012 | 12/31/9999 | 1 | 504.62 |