## Mississippi Division of Medicaid COMMUNITY MENTAL HEALTH SERVICES FEE SCHEDULE **COVER SHEET**



## Additional References:

MS Division of Medicaid Website

MS Envision Interactive Fee Schedule

MS Envision Downloadable Fee Schedule

Medicaid National Correct Coding Initiative (NCCI) Edits

## **MODIFIER USAGE**

NOTE: The modifier is used to denote the type of service. HW modifier must be in the 1st modifier position for all C/PMHC services rendered.

- 1. HE Face-to-Face Service (only required for Crisis Response (H2011))
- 2. HF Required for Substance Use Disorder Services 3. HT Multi-Disiplinary
- 4. HW Community and Private Mental Health Centers (C/PMHC)
- 5. TF Telephonic Service (only required for Crisis Response (H2011))

Note Number	Column Title	Details • Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT) Code						
1	Code							
2	Description	• Short Descriptor for the Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology Code Clinical Description						
3	Prior Authorization	• This column identifies the codes that require prior authorization before the service performed.						
4	Min Age	This column is the covered minimum age for the service.						
5	Max Age	<ul> <li>This column is the covered maximum age for the service.</li> </ul>						
6	Begin Date	<ul> <li>This column represents the beginning date that the fees in columns I and J became effective.</li> </ul>						
7	End Date	• This column represents the end date of the fee segment in columns I and J.						
8	Max Units	• This column represents the maximum units the Division of Medicaid covers for the service.						
9	Fee	• This column is the maximum amount that Division of Medicaid will pay for services for each unit.						
10	Fee Reduced	• This column is the maximum amount less the 5% reduction required by Miss. Code Ann. §43-13-117(B) that the Division of Medicaid will pay for services for each unit.						

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Min Max Max Fee PA Code Description **Begin Date End Date** Fee Units Reduced Age Age 90785 Psytx complex interactive No 0 999 7/1/2020 12/31/9999 1 13.16 12.50 90791 Psych diagnostic evaluation No 0 999 7/1/2020 12/31/9999 1 122.74 116.60 90792 0 999 7/1/2020 12/31/9999 135.68 128.90 Psych diag eval w/med srvcs No 1 12/31/9999 90832 0 999 7/1/2020 57.07 Psytx w pt 30 minutes No 1 60.07 58.38 90833 No 0 999 7/1/2020 12/31/9999 61.45 Psytx w pt w e/m 30 min 1 90834 No 0 999 7/1/2020 12/31/9999 1 79.90 75.91 Psytx w pt 45 minutes 90836 Psytx w pt w e/m 45 min No 0 999 7/1/2020 12/31/9999 1 77.83 73.94 Psytx w pt 60 minutes 0 999 113.70 90837 7/1/2020 12/31/9999 1 119.68 No 90838 Psytx w pt w e/m 60 min No 0 999 7/1/2020 12/31/9999 1 102.35 97.23 999 90846 Family psytx w/o pt 50 min No 0 7/1/2020 12/31/9999 1 88.33 83.91 90847 Family psytx w/pt 50 min No 0 999 7/1/2020 12/31/9999 1 91.50 86.93 Multiple family group psyt> 90849 No 0 999 7/1/2020 12/31/9999 30.48 28.96 1 999 90853 No 0 7/1/2020 12/31/9999 1 23.81 22.62 Group psychotherapy 96127 7/1/2020 Brief emotional/behav assmt No 0 999 12/31/9999 2 3.78 3.59 96130 Psycl tst eval phys/qhp 1st No 0 999 7/1/2020 12/31/9999 1 103.14 97.98 96131 0 999 9/1/2020 12/31/9999 4 79.07 Psycl tst eval phys/ghp ea No 75.12 36.90 96136 Psycl/nrpsyc tst phy/qhp 1st No 0 999 7/1/2020 12/31/9999 1 38.84 0 999 4 96137 9/1/2020 12/31/9999 35.52 33.74 Psycl/nrpsyc tst phy/qhp ea No 96372 Ther/proph/diag inj sc/im No 0 999 9/1/2020 12/31/9999 2 11.68 11.10 999 99201 Office/outpatient visit new No 0 7/1/2020 12/31/9999 1 37.22 35.36 99202 No 0 999 7/1/2020 12/31/9999 59.10 Office/outpatient visit new 1 62.21 99203 Office/outpatient visit new No 0 999 7/1/2020 12/31/9999 1 88.46 84.04 99204 0 999 7/1/2020 12/31/9999 135.96 129.16 No 1 Office/outpatient visit new 99205 Office/outpatient visit new No 0 999 7/1/2020 12/31/9999 1 172.16 163.55 99211 Office/outpatient visit est No 0 999 7/1/2020 12/31/9999 1 18.68 17.75 99212 0 999 7/1/2020 12/31/9999 36.95 35.10 Office/outpatient visit est No 2 0 999 7/1/2020 99213 Office/outpatient visit est No 12/31/9999 2 61.64 58.56 999 99214 0 85.34 Office/outpatient visit est No 7/1/2020 12/31/9999 2 89.83 99215 Office/outpatient visit est No 0 999 7/1/2020 12/31/9999 1 121.01 114.96 99304 Nursing facility care init No 0 999 7/1/2020 12/31/9999 1 76.20 72.39 99305 Nursing facility care init No 0 999 7/1/2020 12/31/9999 1 109.38 103.91 0 7/1/2020 99306 Nursing facility care init No 999 12/31/9999 1 141.01 133.96 99307 0 999 7/1/2020 12/31/9999 35.10 No 1 36.95 Nursing fac care subseq 99308 Nursing fac care subseq No 0 999 7/1/2020 12/31/9999 1 57.94 55.04 99309 Nursing fac care subseq No 0 999 7/1/2020 12/31/9999 1 76.62 72.79 999 99310 0 7/1/2020 12/31/9999 1 113.27 107.61 Nursing fac care subseq No 99324 Domicil/r-home visit new pat No 0 999 7/1/2020 12/31/9999 1 46.28 43.97 99325 0 999 7/1/2020 1 67.43 64.06 Domicil/r-home visit new pat No 12/31/9999 99326 Domicil/r-home visit new pat No 0 999 7/1/2020 12/31/9999 1 117.44 111.57 99327 Domicil/r-home visit new pat No 0 999 7/1/2020 12/31/9999 1 157.33 149.46 999 99328 0 7/1/2020 12/31/9999 176.58 Domicil/r-home visit new pat No 1 185.87 7/1/2020 99334 Domicil/r-home visit est pat No 0 999 12/31/9999 1 50.85 48.31 99335 Domicil/r-home visit est pat No 0 999 7/1/2020 12/31/9999 1 80.63 76.60 99336 Domicil/r-home visit est pat No 0 999 7/1/2020 12/31/9999 113.99 108.29 1 99337 Domicil/r-home visit est pat No 0 999 7/1/2020 12/31/9999 1 164.15 155.94 999 7/1/2020 12/31/9999 99354 No 0 103.89 Prolong e&m/psyctx serv o/p 1 109.36 99355 Prolong e&m/psyctx serv o/p No 0 999 7/1/2020 12/31/9999 4 83.11 78.95 H0031 Mh health assess by non-md No 0 999 9/1/2020 12/31/9999 1 110.47 104.95 H0032 Mh svc plan dev by non-md No 0 999 10/1/2003 12/31/9999 1 18.45 17.53 H0035 Yes 0 999 10/1/2003 12/31/9999 113.00 107.35 Mh partial hosp tx under 24h 1 0 999 96 H2015 Comp comm supp svc, 15 min No 9/1/2020 12/31/9999 14.88 14.14 H0038 Self-help/peer svc per 15min No 0 999 1/1/2012 12/31/9999 6 7.83 7.44

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Code	Description	РА	Min Age	Max Age	Begin Date	End Date	Max Units	Fee	Fee Reduced
H0039	Asser com tx face-face/15min	Yes	0	999	7/1/2012	12/31/9999	40	27.50	26.13
H2011	Crisis interven svc, 15 min	No	0	999	7/1/2012	12/31/9999	32	30.00	28.50
H2011	Crisis interven svc, 15 min	No	0	999	7/1/2012	12/31/9999	32	21.88	20.79
H2012	Behav hlth day treat, per hr	Yes	3	20	7/1/2014	12/31/9999	5	32.00	30.40
H2021	Com wrap-around sv, 15 min	No	0	20	7/1/2012	12/31/9999	16	14.88	14.14
H2017	Psysoc rehab svc, per 15 min	Yes	18	999	9/1/2020	12/31/9999	20	3.87	3.68
S9480	Intensive outpatient psychia	Yes	0	999	9/1/2020	12/31/9999	1	122.54	116.41
T1002	Rn services up to 15 minutes	No	0	999	7/1/2005	12/31/9999	4	18.45	17.53
T1017	Targeted case management	No	0	999	3/1/2015	12/31/9999	8	14.88	14.14
T1502	Medication admin visit	No	0	999	10/1/2003	12/31/9999	2	4.76	4.52
H0018	Short-term res treat	Yes	0	999	9/1/2020	12/31/9999	1	504.62	479.39