

Mississippi Division of Medicaid
Therapeutic and Evaluation 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.

1. HA - Child/Adolescent Program (to be used for all services rendered to a beneficiary under the age of 21)
2. HF - Required for Substance Use Disorder Services

Note Number	Column Title	Details
1	Code	• Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT) 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 is performed.
4	Min Age	• This column is the covered minimum age for the service.
5	Max Age	• This column is the covered maximum age for the service.
6	Begin Date	• This column represents the beginning date that the fees in columns I and J became effective.
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 DOM covers for the service.
9	Fee	• This column is the maximum amount that Division of Medicaid will pay for each unit of service.
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 each unit of service.

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All services and maximums allowed quantities are subject to NCCI procedure-to-procedure or medically unlikely editing even if prior authorized.

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Code	Description	PA	Min Age	Max Age	Begin Date	End Date	Max Units	Fee	Fee Reduced
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
90832	Psytx w pt 30 minutes	NO	0	999	7/1/2020	12/31/9999	1	60.07	57.07
90834	Psytx w pt 45 minutes	NO	0	999	7/1/2020	12/31/9999	1	79.90	75.91
90837	Psytx w pt 60 minutes	NO	0	999	7/1/2020	12/31/9999	1	119.68	113.70
90846	Family psytx w/o pt 50 min	NO	0	999	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
90853	Group psychotherapy	NO	0	999	7/1/2020	12/31/9999	1	23.81	22.62
96112	Devel tst phys/qhp 1st hr	YES	0	20	7/1/2020	12/31/9999	1	116.88	111.04
96113	Devel tst phys/qhp ea addl	YES	0	20	7/1/2020	12/31/9999	6	52.33	49.71
96127	Brief emotional/behav assmt	NO	0	999	7/1/2020	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	Psycl tst eval phys/qhp ea	NO	0	999	7/1/2020	12/31/9999	7	79.07	75.12
96132	Nrpsyc tst eval phys/qhp 1st	YES	0	20	7/1/2020	12/31/9999	1	114.26	108.55
96133	Nrpsyc tst eval phys/qhp ea	YES	0	20	7/1/2020	12/31/9999	7	85.86	81.57
96136	Psycl/nrpsyc tst phy/qhp 1st	NO	0	999	7/1/2020	12/31/9999	1	38.84	36.90
96137	Psycl/nrpsyc tst phy/qhp ea	NO	0	999	7/1/2020	12/31/9999	11	35.52	33.74