

5160-27-03

APPENDIX A

The following rates are effective for dates of service on or after January 1, 2018.

Community Mental Health Center and ALCRX Medicaid Fee Schedule

STATUS CODE:
1 -- Initial maximum payment amount
2 -- Change in maximum payment amount as of the Effective Date
3 -- Discontinued coverage

HCPCS CODE	Modifier	DESCRIPTION	EFFECTIVE DATE	STATUS CODE	CURRENT MAXIMUM PAYMENT AMOUNT	CURRENT MAXIMUM PAYMENT AMOUNT Office	CURRENT MAXIMUM PAYMENT AMOUNT Home/Community	PREVIOUS MAXIMUM PAYMENT AMOUNT
90795		Psytx complex interactive	01/01/2018	1	13.81			
90791		Psytx diagnostic evaluation	01/01/2018	1	130.72			
90792		Psytx dx eval w/med assess	01/01/2018	1	144.35			
90832		Psytx pt&fam 30 minutes	01/01/2018	1	63.11			
90833		Psytx pt&fam w/ek& 30 min	01/01/2018	1	65.37			
90834		Psytx pt&fam 45 minutes	01/01/2018	1	82.05			
90836		Psytx pt&fam w/ek& 45 min	01/01/2018	1	83.03			
90837		Psytx pt&fam 60 minutes	01/01/2018	1	120.36			
90838		Psytx pt&fam w/ek& 60 min	01/01/2018	1	109.53			
90839		Psytx crisis initial 60 min	01/01/2018	1	142.06			
90840		Psytx crisis ea eval 30 min	01/01/2018	1	23.04			
90846		Family psychotherapy (w/o patient)	01/01/2018	1	102.28			
90847		Family psychotherapy (with patient)	01/01/2018	1	100.72			
90849		Multiple-family group psychotherapy	01/01/2018	1	31.28			
90853		Group psychotherapy (other than multiple-family group)	01/01/2018	1	26.45			
93000		Electrocardiogram, complete	01/01/2018	1	15.90			
93005		Electrocardiogram, tracing	01/01/2018	1	6.90			
93010		Electrocardiogram report	01/01/2018	1	7.90			
96101		Psycho testing by psychophys	01/01/2018	1	59.26			
96111		Developmental testing with interpretation & report	01/01/2018	1	56.11			
96116		Neurobehavioral status exam	01/01/2018	1	64.10			
96118		Neuropsych test by psychophys	01/01/2018	1	78.31			
96372		Therapiochdiag inj, sc/im	01/01/2018	1	21.38			
99201		Office/outpatient visit, new	01/01/2018	1	49.38			
99202		Office/outpatient visit, new	01/01/2018	1	84.67			
99203		Office/outpatient visit, new	01/01/2018	1	122.24			
99204		Office/outpatient visit, new	01/01/2018	1	188.51			
99205		Office/outpatient visit, new	01/01/2018	1	239.92			
99211		Office/outpatient visit, est	01/01/2018	1	22.31			
99212		Pre-natal Office/outpatient visit, est	01/01/2018	1	48.97			
99213		Office/outpatient visit, est	01/01/2018	1	82.85			
99214		Office/outpatient visit, est	01/01/2018	1	122.27			
99215		Office/outpatient visit, est	01/01/2018	1	165.15			
99341		Home visit, new patient	01/01/2018	1	53.65			
99342		Home visit, new patient	01/01/2018	1	91.99			
99343		Home visit, new patient	01/01/2018	1	150.80			
99344		Home visit, new patient	01/01/2018	1	210.78			
99345		Home visit, new patient	01/01/2018	1	265.57			
99347		Home visit, established patient	01/01/2018	1	64.00			
99348		Home visit, established patient	01/01/2018	1	97.38			
99349		Home visit, established patient	01/01/2018	1	148.16			
99350		Home visit, established patient	01/01/2018	1	205.79			
99354		Prolonged service, office	01/01/2018	1	89.90			
99355		Prolonged service, office	01/01/2018	1	89.24			
G0396		Alc/Sub. Abuse test inter, 15-30 min	01/01/2018	1	25.05			
G0997		Alc/Sub. Abuse test inter, over 30 min	01/01/2018	1	47.68			
H0001		Alcohol and/or drug assessment (not incident to a licensed practitioner's assessment)	01/01/2018	1	77.22			
H0004		BH counseling and therapy, per 15 minutes (unlicensed)	01/01/2018	1	19.31			
H0004		BH counseling and therapy, per 15 minutes (licensed)	01/1/2018 to 6/30/2018	1	22.50			
H0004		BH counseling and therapy, group per 15 minutes (licensed)	01/1/2018 to 6/30/2018	1	9.87			
H0005		Alcohol and/or drug services, group counseling (unlicensed)	01/01/2018	1	86.44			
H0005	HK	Alcohol and/or drug services, group counseling (licensed)	01/01/2018	1	87.21			
H0005	AF	Alcohol and/or drug services, group counseling (physician)	01/01/2018	1	8.48			
H0006		Alcohol and/or drug services, case management	01/01/2018	1	19.54			
H0010		Alcohol and/or drug services, sub-acute detoxification, residential addiction program (inpatient)	01/01/2018	1	256.33			
H0011		Alcohol and/or drug services, acute detoxification (residential) ar/klon nonrxm (inpatient)	01/01/2018	1	392.86			
H0012		Alcohol and/or drug services, sub-acute detoxification, residential addiction nonrxm (outpatient)	01/01/2018	1	360.26			
H0014		Alcohol and/or drug services, ambulatory detoxification RN	01/01/2018	1	127.68			
H0014		Alcohol and/or drug services, ambulatory detoxification LPN	01/01/2018	1	80.16			
H0015		Alcohol and/or drug services, intensive outpatient, (unlicensed)	01/01/2018	1	1103.04			
H0015	HK	Alcohol and/or drug services, intensive outpatient (licensed)	01/01/2018	1	149.88			
H0015	TG	SUD Partial Hospitalization (unlicensed)	01/01/2018	1	1154.56			
H0015	HK TG	SUD Partial Hospitalization (licensed)	01/01/2018	1	224.82			
H0036		Community Psychiatric Supportive Treatment (CPST), per 15 minutes	01/01/2018	1	19.54			
H0036	HQ	Community Psychiatric Supportive Treatment (CPST), per 15 minutes group	01/01/2018	1	8.99			
H0038		SUD Peer Recovery Support	01/01/2018	1	15.51			
H0038	HQ	SUD Peer Recovery Support Group	01/01/2018	1	1.94			
H0040	AM	Assertive community treatment program, per diem, medium, team (obselvan)	01/01/2018	1	615.64			
H0040	SA/LC	Assertive community treatment program, per diem, medium, team (CNS, CNP PA)	01/01/2018	1	352.75			
H0040	HQ	Assertive community treatment program, per diem, medium, team (Masters, licensed RN, LPN)	01/01/2018	1	261.91			
H0040	HN	Assertive community treatment program, per diem, medium, team (Bachelors)	01/01/2018	1	199.70			
H0040	HM	Assertive community treatment program, per diem, medium, team (Peer)	01/01/2018	1	159.24			
H0048		Alcohol and/or other drug testing, collection and handling, glix, specimens other than blood	01/01/2018	1	14.48			
H2012	HO_UK	TBS Group Services, hourly (QMHS plus 3)	01/01/2018	1	18.54			
H2012	HO_HN	TBS Group Services, hourly (Bachelors)	01/01/2018	1	18.54			
H2012	HO_HO	TBS Group Services, hourly (Masters)	01/01/2018	1	21.05			
H2012	HO_HK	TBS Group Services, hourly (Licensed)	01/01/2018	1	388.10			
H2015		IBRT per 15 minutes	01/01/2018	1	33.26			
H2017		Psychosocial rehabilitation service (LPN)	01/01/2018	1	22.54		29.13	
H2017		Psychosocial rehabilitation service	01/01/2018	1	15.84		20.35	
H2019	UK	TBS, per 15 minutes (QMHS plus 3)	01/01/2018	1	19.96		25.46	
H2019	HN	TBS, per 15 minutes (Bachelors)	01/01/2018	1	19.96		25.46	
H2019	HO	TBS, per 15 minutes (Masters)	01/01/2018	1	22.47		28.59	
H2019		TBS, per 15 minutes (RN)	01/01/2018	1	31.92		41.00	
H2019	HO_UK	TBS, per 15 minutes (QMHS plus 3, Group)	01/01/2018	1	4.99			
H2019	HO_HN	TBS, per 15 minutes (Bachelors, Group)	01/01/2018	1	4.99			
H2019	HO_HO	TBS, per 15 minutes (Masters, Group)	01/01/2018	1	5.62			
H2019	HO	TBS, per 15 minutes (RN, Group)	01/01/2018	1	7.99			
H2020	UK	TBS Group Services Per Diem (QMHS plus 3)	01/01/2018	1	1104.65			
H2020	HN	TBS Group Services Per Diem (Bachelors)	01/01/2018	1	1104.55			
H2020	HO	TBS Group Services Per Diem (Masters)	01/01/2018	1	1117.05			
H2020	HK	TBS Group Services Per Diem (Licensed)	01/01/2018	1	1140.51			
H2034		Alcohol and/or drug abuse halfway house services, per diem	01/01/2018	1	162.57			
H2036		Alcohol and/or other drug treatment program, per diem	01/01/2018	1	213.70			
H2036	TG	Alcohol and/or other drug treatment program, per diem	01/01/2018	1	303.49			
T1002		Alcohol And/Or Drug Services, RN	01/01/2018	1		31.92	41.00	
T1002	HQ	Alcohol And/Or Drug Services, RN Group	01/01/2018	1	7.98			
T1003		Alcohol And/Or Drug Services, LPN	01/01/2018	1		22.54	29.13	
H0023		SRS Supported Employment, Initial	01/01/2018	1	19.53			
H0025		SRS Supported Employment, Subsequent	01/01/2018	1	19.53			
H0038		SRS Peer Recovery Support	01/01/2018	1	15.51			
H0038	HQ	SRS Peer Recovery Support Group	01/01/2018	1	1.94			