## **DWIHN**

## Intensive Crisis Stabilization Services - Children Rate Sheet Effective 04/01/2024

These crisis services are limited to those Providers who are Certified by MDHHS to participate in the Intensive Crisis Stabilization Service demonstration. For Mobile Crisis services report the state required modifier "HT" along with the staff credential modifier. In addition to the billing modifiers listed below, you may also report any approrpariate "informational" modifers. For example, other "informational" modifiers include "HH - Co-Occurring Mental Health and Substance Abuse".

| Code_Description  | Modifiers | FeeScheduleNotes  | UnitType   | UnitRate |
|---|-----------|---|------------|----------|
| H2011 - Crisis Intervention Services  | HT;AF     | Mobile Crisis; Specialty Physician/Psychiatrist           | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | HT;AG     | Mobile Crisis; Physician                                  | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | НТ;АН     | Mobile Crisis; Clinical Psychologist                      | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | HT;HN     | Mobile Crisis; Bachelor's Level                           | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | нт;но     | Mobile Crisis; Master's Level                             | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | НТ;НР     | Mobile Crisis; Doctoral Level                             | 15 Minutes | \$40.23  |
| H2011 - Crisis Intervention Services  | HT;TD     | Mobile Crisis; Registered Nurse                           | 15 Minutes | \$40.23  |
| T1023 - Screening to Determine Appropriateness of Inpatient Hospitalization | AF        | PAR/Inpatient Screening; Specialty Physician/Psychiatrist | Encounter  | \$352.67 |
| T1023 - Screening to Determine Appropriateness of Inpatient Hospitalization | AF;PS     | PAR Re-Assessment; Specialty Physician; Psychiatrist.     | Encounter  | \$176.34 |
| ·   | AG        | PAR/Inpatient Screening; Physician                        | Encounter  | \$352.67 |
| T1023 - Screening to Determine Appropriateness of Inpatient Hospitalization | AG;PS     | PAR Re-Assessment; Physician.                             | Encounter  | \$176.34 |
| T1023 - Screening to Determine Appropriateness of Inpatient Hospitalization | АН        | PAR/Inpatient Screening; Clinical Psychologist            | Encounter  | \$352.67 |

## **DWIHN**

## Intensive Crisis Stabilization Services - Children Rate Sheet Effective 04/01/2024

| 5   | AH;PS | PAR Re-Assessment; Clinical Psychologist. | Encounter | \$176.34 |
|---|-------|---|-----------|----------|
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | HN    | PAR/Inpatient Screening; Bachelor's Level | Encounter | \$352.67 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | HN;PS | PAR Re-Assessment; Bachelor's Level.      | Encounter | \$176.34 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | НО    | PAR/Inpatient Screening; Master's Level   | Encounter | \$352.67 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | HO;PS | PAR Re-Assessment; Master's Level.        | Encounter | \$176.34 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | HP    | PAR/Inpatient Screening; Doctoral Level   | Encounter | \$352.67 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | HP;PS | PAR Re-Assessment; Doctoral Level.        | Encounter | \$176.34 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | SA    | PAR/Inpatient Screening; PA,NP,CNS        | Encounter | \$352.67 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | SA;PS | PAR Re-Assessment; PA, NP, CNS.           | Encounter | \$176.34 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | TD    | PAR/Inpatient Screening; Registered Nurse | Encounter | \$352.67 |
| Hospitalization   |       |   |           |          |
| T1023 - Screening to Determine Appropriateness of Inpatient | TD;PS | PAR Re-Assessment; Registered Nurse.      | Encounter | \$176.34 |
| Hospitalization   |       |   |           |          |