



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
90785 - Interactive Psychotherapy	N/A	Authorization only code.	Encounter	\$0.00
90785 - Interactive Psychotherapy	AF	(Specialty Physician/Psychiatrist)	Encounter	\$9.37
90785 - Interactive Psychotherapy	AG	(Physician)	Encounter	\$9.37
90785 - Interactive Psychotherapy	AH	(Clinical Psychologist)	Encounter	\$9.37
90785 - Interactive Psychotherapy	HN	(Bachelor's Level)	Encounter	\$9.37
90785 - Interactive Psychotherapy	HO	(Master's Level)	Encounter	\$9.37
90785 - Interactive Psychotherapy	HP	(Doctoral Level)	Encounter	\$9.37
90785 - Interactive Psychotherapy	SA	PA,NP,CNS	Encounter	\$9.37
90785 - Interactive Psychotherapy	TD	Registered Nurse	Encounter	\$9.37
9079X - Psychiatric Eval - Bundle for 90791 & 90792.	N/A	Bundled Authorization Only code.	Encounter	\$0.00
90791 - Psych Eval (no medical svc)	AF;AG;AH;HO;HP;SA	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Master's Level; Doctoral Level; PA,NP,CNS	Encounter	\$242.56
90791 - Psych Eval (no medical svc)	BI with: AF;AG;AH;HO;HP;SA	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Master's Level; Doctoral Level; PA,NP,CNS	Encounter	\$216.86
90792 - Psych Eval (w/medical svc)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$314.21
90792 - Psych Eval (w/medical svc)	SA	PA,NP,CNS	Encounter	\$314.21
9083X - Psychotherapy, Bundled Authorization code for 90832, 90834 & 90837.	N/A	Bundled Authorization code for 90832; 90834 & 90837.	Encounter	\$0.00
90832 - Psychotherapy, 30 (16-37 mins)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	AG	(Physician)	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	AH	(Clinical Psychologist)	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	HN	Bachelor's Level	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	HO	(Master's Level)	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	HP	(Doctoral Level)	Encounter	\$99.22
90832 - Psychotherapy, 30 (16-37 mins)	TD	Registered Nurse	Encounter	\$99.22
90833 - Individual Psychotherapy with E/M (16-37 mins)	AF;AG;SA	Specialty Physician/Psychiatrist; Physician; PA,NP,CNS	Encounter	\$46.75
90834 - Psychotherapy, 45 (38-52 mins)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$165.38
90834 - Psychotherapy, 45 (38-52 mins)	AG	(Physician)	Encounter	\$165.38
90834 - Psychotherapy, 45 (38-52 mins)	AH	(Clinical Psychologist)	Encounter	\$165.38



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
90834 - Psychotherapy, 45 (38-52 mins)	HN	Bachelor's Level.	Encounter	\$165.38
90834 - Psychotherapy, 45 (38-52 mins)	HO	(Master's Level)	Encounter	\$165.38
90834 - Psychotherapy, 45 (38-52 mins)	HP	(Doctoral Level)	Encounter	\$165.38
90834 - Psychotherapy, 45 (38-52 mins)	TD	Registered Nurse	Encounter	\$165.38
90836 - Individual Psychotherapy with E/M (38-52 mins)	AF;AG;SA	Specialty Physician/Psychiatrist; Physician; PA,NP,CNS	Encounter	\$59.11
90837 - Psychotherapy, 60 (53+ mins)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	AG	(Physician)	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	AH	(Clinical Psychologist)	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	HN	Bachelor's Level.	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	HO	(Master's Level)	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	HP	(Doctoral Level)	Encounter	\$220.50
90837 - Psychotherapy, 60 (53+ mins)	TD	Registered Nurse	Encounter	\$220.50
90838 - Individual Psychotherapy with E/M (53+ mins)	AF;AG;SA	Specialty Physician/Psychiatrist; Physician; PA,NP,CNS	Encounter	\$78.09
90839 - Psychotherapy for crisis, 60 min	AF	(Specialty Physician/Psychiatrist)	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	AG	(Physician)	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	AH	(Clinical Psychologist)	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	HN	Bachelor's Level	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	HO	(Master's Level)	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	HP	(Doctoral Level)	Encounter	\$132.30
90839 - Psychotherapy for crisis, 60 min	TD	Registered Nurse	Encounter	\$132.30
90840 - Psychotherapy for crisis, each additional 30 minutes	AF	(Specialty Physician/Psychiatrist)	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	AG	(Physician)	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	AH	(Clinical Psychologist)	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	HN	Bachelor's Level.	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	HO	(Master's Level)	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	HP	(Doctoral Level)	Encounter	\$110.26
90840 - Psychotherapy for crisis, each additional 30 minutes	TD	Registered Nurse	Encounter	\$110.26
9084X - Family Therapy - Bundled Authorization code for 90846 & 90847.	N/A	Bundled Authorization Only code for 90846 & 90847.	Encounter	\$0.00



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
90846 - Family Therapy Without Consumer Present	AF	(Specialty Physician/Psychiatrist)	Encounter	\$137.81
90846 - Family Therapy Without Consumer Present	AG	(Physician)	Encounter	\$137.81
90846 - Family Therapy Without Consumer Present	AH	(Clinical Psychologist)	Encounter	\$137.81
90846 - Family Therapy Without Consumer Present	HO	(Master's Level)	Encounter	\$137.81
90846 - Family Therapy Without Consumer Present	HP	(Doctoral Level)	Encounter	\$137.81
90847 - Family Therapy With Consumer Present	AF	(Specialty Physician/Psychiatrist)	Encounter	\$148.83
90847 - Family Therapy With Consumer Present	AG	(Physician)	Encounter	\$148.83
90847 - Family Therapy With Consumer Present	AH	(Clinical Psychologist)	Encounter	\$148.83
90847 - Family Therapy With Consumer Present	HO	(Master's Level)	Encounter	\$148.83
90847 - Family Therapy With Consumer Present	HP	(Doctoral Level)	Encounter	\$148.83
90849 - MULTIPLE FAMILY GROUP PS	N/A	Authorization only code.	Encounter	\$0.00
90849 - MULTIPLE FAMILY GROUP PS	AF	(Specialty Physician/Psychiatrist)	Encounter	\$57.89
90849 - MULTIPLE FAMILY GROUP PS	AG	(Physician)	Encounter	\$57.89
90849 - MULTIPLE FAMILY GROUP PS	AH	(Clinical Psychologist)	Encounter	\$57.89
90849 - MULTIPLE FAMILY GROUP PS	HO	(Master's Level)	Encounter	\$57.89
90849 - MULTIPLE FAMILY GROUP PS	HP	(Doctoral Level)	Encounter	\$57.89
90849 - MULTIPLE FAMILY GROUP PS	TD	Registered Nurse	Encounter	\$57.89
90853 - Group Therapy	N/A	Authorization only code.	Encounter	\$0.00
90853 - Group Therapy	AF	(Specialty Physician/Psychiatrist); Individual member served.	Encounter	\$57.89
90853 - Group Therapy	AF;UN	Specialty Physician/Psychiatrist; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	AF;UP	Specialty Physician/Psychiatrist; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	AF;UQ	Specialty Physician/Psychiatrist; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	AF;UR	Specialty Physician/Psychiatrist; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	AF;US	Specialty Physician/Psychiatrist; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	AG	(Physician); Individual member served.	Encounter	\$57.89
90853 - Group Therapy	AG;UN	Physician; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	AG;UP	Physician; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	AG;UQ	Physician; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	AG;UR	Physician; 5 patients served.	Encounter	\$57.89



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
90853 - Group Therapy	AG;US	Physician; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	AH	Clinical Psychologist; Individual member served.	Encounter	\$57.89
90853 - Group Therapy	AH;UN	Clinical Psychologist; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	AH;UP	Clinical Psychologist; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	AH;UQ	Clinical Psychologist; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	AH;UR	Clinical Psychologist; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	AH;US	Clinical Psychologist; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	HN	Bachelor's Level; Individual member served.	Encounter	\$57.89
90853 - Group Therapy	HN;UN	Bachelor's Level; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	HN;UP	Bachelor's Level; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	HN;UQ	Bachelor's Level; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	HN;UR	Bachelor's Level; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	HN;US	Bachelor's Level; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	HO	Master's Level; Individual member served.	Encounter	\$57.89
90853 - Group Therapy	HO;UN	Master's Level; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	HO;UP	Master's Level; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	HO;UQ	Master's Level; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	HO;UR	Master's Level; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	HO;US	Master's Level; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	HP	Doctoral Level; Individual member served.	Encounter	\$57.89
90853 - Group Therapy	HP;UN	Doctoral Level; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	HP;UP	Doctoral Level; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	HP;UQ	Doctoral Level; 4 patients served.	Encounter	\$57.89
90853 - Group Therapy	HP;UR	Doctoral Level; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	HP;US	Doctoral Level; 6 or more patients served.	Encounter	\$57.89
90853 - Group Therapy	TD	Registered Nurse; Individual member served.	Encounter	\$57.89
90853 - Group Therapy	TD;UN	Registered Nurse; 2 patients served.	Encounter	\$57.89
90853 - Group Therapy	TD;UP	Registered Nurse; 3 patients served.	Encounter	\$57.89
90853 - Group Therapy	TD;UQ	Registered Nurse; 4 patients served.	Encounter	\$57.89



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
90853 - Group Therapy	TD;UR	Registered Nurse; 5 patients served.	Encounter	\$57.89
90853 - Group Therapy	TD;US	Registered Nurse; 6 or more patients served.	Encounter	\$57.89
90887 - Psychiatric Evaluation interpretive interview	N/A	Authorization only code.	Encounter	\$0.00
90887 - Psychiatric Evaluation interpretive interview	AF	(Specialty Physician/Psychiatrist)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	AG	(Physician)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	AH	(Clinical Psychologist)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	HN	Bachelor's Level)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	HO	(Master's Level)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	HP	(Doctoral Level)	Encounter	\$71.67
90887 - Psychiatric Evaluation interpretive interview	TD	Registered Nurse	Encounter	\$71.67
9250X - Speech Hearing & Language Therapy - Bundled Authorization only code for 92507.	N/A	Bundle Authorization Only code for (92507).	Encounter	\$0.00
92507 - Speech & Language, Individual - In Office.	HM	Less than Bachelor's Level; Office Based.	Encounter	\$76.63
92507 - Speech & Language, Individual - In Office.	HO	SLP; Office Based.	Encounter	\$76.63
92507 - Speech & Language, Individual - In Office.	HP	Doctoral Level; Office Based.	Encounter	\$76.63
9252X - Speech Sound Production - Bundled Authorization only code for 92523.	N/A	Bundle Authorization Only code for (92523).	Encounter	\$0.00
92523 - Evaluation of Speech Sound Production with evaluation of language comprehension	HO	SLP; Office Based.	Encounter	\$132.30
92523 - Evaluation of Speech Sound Production with evaluation of language comprehension	HP	Doctoral Level; Office Based.	Encounter	\$132.30
9261X - Swallowing function - Bundled Authorization only code for 92610.	N/A	Bundle Authorization Only code for (92610).	Encounter	\$0.00
92610 - Speech/Language - Evaluation of oral & pharyngeal swallowing function	HO	SLP	Encounter	\$132.30
92610 - Speech/Language - Evaluation of oral & pharyngeal swallowing function	HP	Doctoral Level	Encounter	\$132.30
96110 - Assessment - Developmental screening	N/A	Authorization only code.	Encounter	\$0.00



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96110 - Assessment - Developmental screening	AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$137.81
96110 - Assessment - Biopsychosocial Annual	AN with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$108.43
96110 - Assessment - Biopsychosocial Readmission	PS with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$108.43
96110 - Assessment - Devereaux Early Childhood Assessment (DECA)	DE with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$216.86
96110 - Assessment - Devereaux Early Childhood Assessment (DECA)	DT with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$216.86
96110 - Assessment - Devereaux Early Childhood Assessment (DECA)	DC with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$216.86
96110 - Assessment - MichiCANS	CN with: AF;AG;AH;HN; HP;TD;HO;TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's Level; Master's Level; Doctoral Level; PA,NP,CNS; Registered Nurse	Encounter	\$216.68
9613X - Psychological testing evaluation - Bundled Authorization only code for 96130 and 96131.	N/A	Bundle Auth code for 96130 & 96131.	Hour	\$0.00
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AF	(Specialty Physician/Psychiatrist)	Hour	\$137.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AG	(Physician)	Hour	\$137.81
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AH	(Clinical Psychologist)	Hour	\$137.81
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	HO	(Master's Level)	Hour	\$137.81
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	HP	(Doctoral Level)	Hour	\$137.81
96130 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	SA	PA, NP, CNS	Hour	\$137.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AF	(Specialty Physician/Psychiatrist)	Hour	\$137.81
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AG	(Physician)	Hour	\$137.81
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AH	(Clinical Psychologist)	Hour	\$137.81
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	HO	(Master's Level)	Hour	\$137.81
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	HP	(Doctoral Level)	Hour	\$137.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96131 - Psychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	SA	PA, NP, CNS	Hour	\$137.81
9613Y - Neuropsychological testing evaluation - Bundled Authorization only code for 96132 & 96133.	N/A	Bundled Auth code for 96132 & 96133.	Hour	\$0.00
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AF	(Specialty Physician/Psychiatrist)	Hour	\$137.81
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AG	(Physician)	Hour	\$137.81
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	AH	(Clinical Psychologist)	Hour	\$137.81
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	HO	(Master's Level)	Hour	\$137.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	HP	(Doctoral Level)	Hour	\$137.81
96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; First hour	SA	PA,NP,CNS	Hour	\$137.81
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AF	(Specialty Physician/Psychiatrist)	Hour	\$137.81
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AG	(Physician)	Hour	\$137.81
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	AH	(Clinical Psychologist)	Hour	\$137.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	HO	(Master's Level)	Hour	\$137.81
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	HP	(Doctoral Level)	Hour	\$137.81
96133 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report; Each add. hour	SA	PA,NP,CNS	Hour	\$137.81
9613Z - Psych test administration and scoring - Bundled Authorization only code for 96136 and 96137.	N/A	Bundled Auth code for 96136 & 96137.	30 minutes	\$0.00
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	AF	(Specialty Physician/Psychiatrist)	30 minutes	\$68.91
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	AG	(Physician)	30 minutes	\$68.91
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	AH	(Clinical Psychologist)	30 minutes	\$68.91



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	HO	(Master's Level)	30 minutes	\$68.91
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	HP	(Doctoral Level)	30 minutes	\$68.91
96136 - Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; First 30 minutes	SA	PA, NP, CNS	30 minutes	\$68.91
96137 - 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	AF	(Specialty Physician/Psychiatrist)	30 minutes	\$68.91
96137 - 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	AG	(Physician)	30 minutes	\$68.91
96137 - 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	AH	(Clinical Psychologist)	30 minutes	\$68.91
96137 - 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	HO	(Master's Level)	30 minutes	\$68.91



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96137 - 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	HP	(Doctoral Level)	30 minutes	\$68.91
96137 - 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	SA	PA, NP, CNS	30 minutes	\$68.91
9613W - Psych test administration and scoring by technician - Bundled Authorization only code for 96138 and 96139.	N/A	Bundled Auth for 96138 & 96139.	30 minutes	\$0.00
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	AF	(Specialty Physician/Psychiatrist)	30 minutes	\$48.24
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	AG	(Physician)	30 minutes	\$48.24
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	AH	(Clinical Psychologist)	30 minutes	\$48.24
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	HN	(Bachelor's Level)	30 minutes	\$48.24
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	HO	(Master's Level)	30 minutes	\$48.24
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	HP	(Doctoral Level)	30 minutes	\$48.24



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; First 30 minutes	TD	Registered Nurse	30 minutes	\$48.24
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	AF	(Specialty Physician/Psychiatrist)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	AG	(Physician)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	AH	(Clinical Psychologist)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	HN	(Bachelor's Level)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	HO	(Master's Level)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	HP	(Doctoral Level)	30 minutes	\$47.90
96139 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; Each additional 30 minutes	TD	Registered Nurse	30 minutes	\$47.90
96372 - Medication Administration (injection)	N/A	Authorization only code	Encounter	\$0.00
96372 - Medication Administration (injection)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$27.57
96372 - Medication Administration (injection)	AG	(Physician)	Encounter	\$27.57
96372 - Medication Administration (injection)	HM	Less than Bachelor's Level	Encounter	\$27.57
96372 - Medication Administration (injection)	SA	PA,NP,CNS	Encounter	\$27.57



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
96372 - Medication Administration (injection)	TD	Registered Nurse	Encounter	\$27.57
96372 - Medication Administration (injection)	TE	Licensed Practical Nurse	Encounter	\$27.57
9711X - OT/PT ROM - Bundled Authorization only code for 97110.	N/A	Bundled Authorization Only code.	15 Minutes	\$0.00
97110 - OT/PT Strength ROM - Individual	CO	Occupational Therapist Assistant; Office Based.	15 Minutes	\$29.38
97110 - OT/PT Strength ROM - Individual	CQ	Physical Therapist Assistant; Office Based.	15 Minutes	\$29.38
97110 - OT/PT Strength ROM - Individual	HN	Bachelor's Level; Office Based.	15 Minutes	\$29.38
97110 - OT/PT Strength ROM - Individual	HO	Master's Level; Office Based.	15 Minutes	\$29.38
97110 - OT/PT Strength ROM - Individual	HP	Doctoral Level; Office Based.	15 Minutes	\$29.38
9716X - PT Generic complexity - Bundled Authorization only code for 97161, 97162 and 97163.	N/A	Bundle Authorization Only code.	Encounter	\$0.00
97161 - PT Low Complexity	HN	Bachelor's Level	Encounter	\$110.26
97161 - PT Low Complexity	HO	Master's Level	Encounter	\$110.26
97161 - PT Low Complexity	HP	Doctoral Level	Encounter	\$110.26
97162 - PT Moderate Complexity	HN	Bachelor's Level	Encounter	\$165.38
97162 - PT Moderate Complexity	HO	Master's Level	Encounter	\$165.38
97162 - PT Moderate Complexity	HP	Doctoral Level	Encounter	\$165.38
97163 - PT High Complexity	HN	Bachelor's Level	Encounter	\$214.99
97163 - PT High Complexity	HO	Master's Level	Encounter	\$214.99
97163 - PT High Complexity	HP	Doctoral Level	Encounter	\$214.99
97164 - PT Re-Evaluation	N/A	Authorization only code.	Encounter	\$0.00
97164 - PT Re-Evaluation	HN	Bachelor's Level	Encounter	\$132.30
97164 - PT Re-Evaluation	HO	Master's Level	Encounter	\$132.30
97164 - PT Re-Evaluation	HP	Doctoral Level	Encounter	\$132.30
9716Y - Occupational Therapy Evaluation - Bundled Authorization only code for 97165, 97166, & 97167.	N/A	Bundle Authorization Only code.	Encounter	\$0.00
97165 - OT Low Complexity	HN	Bachelor's Level	Encounter	\$110.26
97165 - OT Low Complexity	HO	Master's Level	Encounter	\$110.26
97166 - OT Moderate Complexity	HN	Bachelor's Level	Encounter	\$165.38



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
97166 - OT Moderate Complexity	HO	Master's Level	Encounter	\$165.38
97167 - OT High Complexity	HN	Bachelor's Level	Encounter	\$248.07
97167 - OT High Complexity	HO	Master's Level	Encounter	\$248.07
97168 - OT Re-Evaluation	N/A	Authorization Only Code for 97168.	Encounter	\$0.00
97168 - OT Re-Evaluation	HN	Bachelor's Level	Encounter	\$132.30
97168 - OT Re-Evaluation	HO	Master's Level	Encounter	\$132.30
97530 - OT/PT Individual Therapeutic Activities	CO	Occupational Therapist Assistant; Office Based.	15 Minutes	\$22.06
97530 - OT/PT Individual Therapeutic Activities	HN	Bachelor's Level; Office Based.	15 Minutes	\$22.06
97530 - OT/PT Individual Therapeutic Activities	HO	Master's Level; Office Based.	15 Minutes	\$22.06
97530 - OT/PT Individual Therapeutic Activities	HP	Doctoral Level; Office Based.	15 Minutes	\$22.06
9753X - OT/PT Therapeutic - Bundled Authorization only code for 97530.	N/A	Bundle Authorization Only Code for 97530.	15 Minutes	\$0.00
9753Y - OT/PT Sensory Integration - Bundled Authorization only code for 97533.	N/A	Bundle Authorization Only Code 97533.	15 Minutes	\$0.00
97533 - OT/PT Individual Sensory Integrative Techniques	CO	Occupational Therapist Assistant; ; Office Based.	15 Minutes	\$22.06
97533 - OT/PT Individual Sensory Integrative Techniques	HN	Bachelor's Level; ; Office Based.	15 Minutes	\$22.06
97533 - OT/PT Individual Sensory Integrative Techniques	HO	Master's Level; Office Based.	15 Minutes	\$22.06
992XX - E&M visits. Bundled Authorization only code for 99202; 99203; 99204; 99205; 99211; 99212; 99213; 99214; 99215; & 99417.	N/A	Bundled Auth code for 99202; 99203; 99204; 99205 & 99211; 99212; 99213; 99214; 99215 & 99417.	Encounter	\$0.00
99202 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (15 to 29 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$99.22
99202 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (15 to 29 minutes)	AG	(Physician)	Encounter	\$99.22



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
99202 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (15 to 29 minutes)	SA	PA, NP, CNS	Encounter	\$99.22
99203 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (30 to 44 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$137.81
99203 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (30 to 44 minutes)	AG	(Physician)	Encounter	\$137.81
99203 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (30 to 44 minutes)	SA	PA, NP, CNS	Encounter	\$137.81
99204 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient a medically appropriate history and/or examination and moderate level of medical decision making. (45 to 59 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$176.40
99204 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient a medically appropriate history and/or examination and moderate level of medical decision making. (45 to 59 minutes)	AG	(Physician)	Encounter	\$176.40
99204 - E&M visits. Office or other outpatient visit for the evaluation and management of a new patient a medically appropriate history and/or examination and moderate level of medical decision making. (45 to 59 minutes)	SA	PA, NP, CNS	Encounter	\$176.40



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
99205 - E&M Visit. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (60 to 74 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$209.48
99205 - E&M Visit. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (60 to 74 minutes)	AG	(Physician)	Encounter	\$209.48
99205 - E&M Visit. Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (60 to 74 minutes)	SA	PA, NP, CNS	Encounter	\$209.48
99211 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	AF	(Specialty Physician/Psychiatrist)	Encounter	\$55.12
99211 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	AG	(Physician)	Encounter	\$55.12
99211 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	SA	PA, NP, CNS	Encounter	\$55.12



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
99211 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	TD	Registered Nurse	Encounter	\$55.12
99211 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	TE	Licensed Practical Nurse	Encounter	\$55.12
99212 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (10 to 19 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$104.73
99212 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (10 to 19 minutes)	AG	(Physician)	Encounter	\$104.73
99212 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. (10 to 19 minutes)	SA	PA, NP, CNS	Encounter	\$104.73
99213 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (20 to 29 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$170.89



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
99213 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (20 to 29 minutes)	AG	(Physician)	Encounter	\$170.89
99213 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. (20 to 29 minutes)	SA	PA, NP, CNS	Encounter	\$170.89
99214 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. (30 to 39 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$198.46
99214 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. (30 to 39 minutes)	AG	(Physician)	Encounter	\$198.46
99214 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. (30 to 39 minutes)	SA	PA, NP, CNS	Encounter	\$198.46
99215 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (40 to 54 minutes)	AF	(Specialty Physician/Psychiatrist)	Encounter	\$214.99
99215 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (40 to 54 minutes)	AG	(Physician)	Encounter	\$214.99



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
99215 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (40 to 54 minutes)	SA	PA, NP, CNS	Encounter	\$214.99
99215 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (40 to 54 minutes)	TD	Registered Nurse	Encounter	\$214.99
99215 - E&M Visit. Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. (40 to 54 minutes)	TE	Licensed Practical Nurse	Encounter	\$214.99
G0177 - Family Psycho-education: family educational groups	N/A	Authorization only code.	Encounter	\$0.00
G0177 - Family Psycho-education: family educational groups	AF	(Specialty Physician/Psychiatrist)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	AG	(Physician)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	AH	(Clinical Psychologist)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	HN	(Bachelor's Level)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	HO	(Master's Level)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	HP	(Doctoral Level)	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	SA	PA, NP,CNS	Encounter	\$66.16
G0177 - Family Psycho-education: family educational groups	TD	Registered Nurse	Encounter	\$66.16
G8431 - Screening for depression - documented as positive and a follow-up plan is documented.	New code effective 4/1/25	To be utilized with another assessment code, reportable for Screening of Depression and Follow-up (CDF) Measure		\$0.01
G8510 - Screening for depression - documented as negative, a follow-up plan is not required.	New code effective 4/1/26	To be utilized with another assessment code, reportable for Screening of Depression and Follow-up (CDF) Measure		\$0.01
H0031 - LOCUS Screening	WX	Authorization only code.	Encounter	\$0.00
H0031 - LOCUS Screening	WX With AH;HO;HN; and WX IF with AH;HO;HN	Clinical Psycholgist; Master's Level; Bachelor's Level and Infant Mental Health with Clinical Psycholgist; Master's Level; Bachelor's Level	Encounter	\$72.29



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0031 - Behavior Identification Assessment for non-ABA	6Y	Authorization only code.	Encounter	\$0.00
H0031 - Behavior Identification Assessment for non-ABA	6Y With AH;HO;HN	Clinical Psychologist; Master's Level; Bachelor's Level	Encounter	\$102.00
H0032 - Treatment Plan Development by Non-Physician	N/A	Authorization Only code; Development of Tx Plan.	Encounter	\$0.00
H0032 - Treatment Plan Development by Non-Physician	AE	(Dietician)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	AH	(Clinical Psychologist)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	CO	(Occupational Therapist Assistant)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	CQ	(Physical Therapist Assistant)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	HN	(Bachelor's Level)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	HO	(Master's Level)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	HP	(Doctoral Level)	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	SA	PA, NP, CNS	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	TD	Registered Nurse	Encounter	\$214.99
H0032 - Treatment Plan Development by Non-Physician	WQ	Independent Facilitator	Encounter	\$214.99
H0032 - Treatment Plan Monitoring of speciality service	TS	Authorization Only for Monitoring of Treatment Plan.	Encounter	\$0.00
H0032 - Treatment Plan Monitoring of speciality service	TS;AE	Dietician; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;AH	Clinical Psychologist; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;CO	Occupational Therapist Assistant; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;CQ	Physical Therapist Assistant; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;HN	Bachelor's Level; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;HO	Master's Level; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;HP	Doctoral Level; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;SA	PA, NP, CNS; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;TD	Registered Nurse; Monitoring of Tx Plan.	Encounter	\$143.32
H0032 - Treatment Plan Monitoring of speciality service	TS;WQ	Independent Facilitator; Monitoring of Tx Plan.	Encounter	\$143.32
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	N/A	Authorization Only code for Home Based and Infant Mental Health.	15 Minutes	\$0.00
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF	Specialty physician; Psychiatrist; Individual member served.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;FH	Specialty physician; Psychiatrist; Individual member served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;IF	Specialty physician; Psychiatrist; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;IF;FH	Specialty physician; Psychiatrist; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;LI	Specialty Physician; Psychiatrist; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UN	Specialty physician; Psychiatrist; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UN;FH	Specialty physician; Psychiatrist; 2 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UN;IF	Specialty physician; Psychiatrist; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UN;IF;FH	Specialty physician; Psychiatrist; 2 members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UN;LI	Specialty Physician; Psychiatrist; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UP	Specialty physician; Psychiatrist; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UP;FH	Specialty physician; Psychiatrist; 3 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UP;IF	Specialty physician; Psychiatrist; 3 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UP;IF;FH	Specialty physician; Psychiatrist; 3 members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UP;LI	Specialty Physician; Psychiatrist; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UQ	Specialty physician; Psychiatrist; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UQ;FH	Specialty physician; Psychiatrist; 4 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UQ;IF	Specialty physician; Psychiatrist; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UQ;IF;FH	Specialty physician; Psychiatrist; 4 members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UQ;LI	Specialty Physician; Psychiatrist; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UR	Specialty physician; Psychiatrist; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UR;FH	Specialty physician; Psychiatrist; 5 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UR;IF	Specialty physician; Psychiatrist; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UR;IF;FH	Specialty physician; Psychiatrist; 5 members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;UR;LI	Specialty Physician; Psychiatrist; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;US	Specialty physician; Psychiatrist; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;US;FH	Specialty physician; Psychiatrist; 6 or more members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;US;IF	Specialty physician; Psychiatrist; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;US;IF;FH	Specialty physician; Psychiatrist; 6 or more members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AF;US;LI	Specialty Physician; Psychiatrist; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG	Physician; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;FH	Physician; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;IF	Physician; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;IF;FH	Physician; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;LI	Physician; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UN	Physician; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UN;FH	Physician; 2 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UN;IF	Physician; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UN;IF;FH	Physician; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UN;LI	Physician; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UP	Physician; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UP;FH	Physician; 3 members served. Face to Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UP;IF	Physician; 3 members served. Infant Mental Health.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UP;IF;FH	Physician; 3 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UP;LI	Physician; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UQ	Physician; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UQ;FH	Physician; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UQ;IF	Physician; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UQ;IF;FH	Physician; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UQ;LI	Physician; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UR	Physician; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UR;FH	Physician; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UR;IF	Physician; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UR;IF;FH	Physician; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;UR;LI	Physician; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;US	Physician; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;US;FH	Physician; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;US;IF	Physician; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;US;IF;FH	Physician; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AG;US;LI	Physician; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH	Clinical Psychologist; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;FH	Clinical Psychologist; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;IF	Clinical Psychologist; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;IF;FH	Clinical Psychologist; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;LI	Clinical Psychologist; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UN	Clinical Psychologist; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UN;FH	Clinical Psychologist; 2 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UN;IF	Clinical Psychologist; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UN;IF;FH	Clinical Psychologist; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UN;LI	Clinical Psychologist; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UP	Clinical Psychologist; 3 members served.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UP;FH	Clinical Psychologist; 3 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UP;IF	Clinical Psychologist; 3 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UP;IF;FH	Clinical Psychologist; 3 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UP;LI	Clinical Psychologist; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UQ	Clinical Psychologist; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UQ;FH	Clinical Psychologist; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UQ;IF	Clinical Psychologist; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UQ;IF;FH	Clinical Psychologist; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UQ;LI	Clinical Psychologist; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UR	Clinical Psychologist; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UR;FH	Clinical Psychologist; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UR;IF	Clinical Psychologist; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UR;IF;FH	Clinical Psychologist; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;US	Clinical Psychologist; 6 or more members served.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;UR;LI	Clinical Psychologist; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;US;FH	Clinical Psychologist; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;US;IF	Clinical Psychologist; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;US;IF;FH	Clinical Psychologist; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	AH;US;LI	Clinical Psychologist; 6 or members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM	Less than Bachelor's Level; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;FH	Less than Bachelor's Level; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;IF	Less than Bachelor's Level; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;IF;FH	Less than Bachelor's Level; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;LI	Less than Bachelor's Level; Individual member served. Infant Mental Health. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UN	Less than Bachelor's Level; 2 patients served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UN;FH	Less than Bachelor's Level; 2 patients served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UN;IF	Less than Bachelor's Level; 2 patients served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UN;IF;FH	Less than Bachelor's Level; 2 patients served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UN;LI	Less than Bachelor's Level; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UP	Less than Bachelor's Level; 3 patients served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UP;FH	Less than Bachelor's Level; 3 patients served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UP;IF	Less than Bachelor's Level; 3 patients served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UP;IF;FH	Less than Bachelor's Level; 3 patients served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UP;LI	Less than Bachelor's Level; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UQ	Less than Bachelor's Level; 4 patients served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UQ;FH	Less than Bachelor's Level; 4 patients served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UQ;IF	Less than Bachelor's Level; 4 patients served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UQ;IF;FH	Less than Bachelor's Level; 4 patients served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UQ;LI	Less than Bachelor's Level; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UR	Less than Bachelor's Level; 5 patients served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UR;FH	Less than Bachelor's Level; 5 patients served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UR;IF	Less than Bachelor's Level; 5 patients served. Infant Mental Health.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UR;IF;FH	Less than Bachelor's Level; 5 patients served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;UR;LI	Less than Bachelor's Level; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;US	Less than Bachelor's Level; 6 or more patients served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;US;FH	Less than Bachelor's Level; 6 or more patients served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;US;IF	Less than Bachelor's Level; 6 or more patients served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;US;IF;FH	Less than Bachelor's Level; 6 or more patients served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HM;US;LI	Less than Bachelor's Level; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN	Bachelor's Level; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;FH	Bachelor's Level; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;IF	Bachelor's Level; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;IF;FH	Bachelor's Level; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;LI	Bachelor's Level; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UN	Bachelor's Level; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UN;FH	Bachelor's Level; 2 members served. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UN;IF	Bachelor's Level; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UN;IF;FH	Bachelor's Level; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UN;LI	Bachelor's Level; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UP	Bachelor's Level; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UP;FH	Bachelor's Level; 3 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UP;IF	Bachelor's Level; 3 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UP;IF;FH	Bachelor's Level; 3 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UP;LI	Bachelor's Level; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UQ	Bachelor's Level; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UQ;FH	Bachelor's Level; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UQ;IF	Bachelor's Level; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UQ;IF;FH	Bachelor's Level; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UQ;LI	Bachelor's Level; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UR	Bachelor's Level; 5 members served.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UR;FH	Bachelor's Level; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UR;IF	Bachelor's Level; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UR;IF;FH	Bachelor's Level; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;UR;LI	Bachelor's Level; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;US	Bachelor's Level; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;US;FH	Bachelor's Level; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;US;IF	Bachelor's Level; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;US;IF;FH	Bachelor's Level; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HN;US;LI	Bachelor's Level; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO	Master's Level; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;FH	Master's Level; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;IF	Master's Level; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;IF;FH	Master's Level; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;LI	Master's Level; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UN	Master's Level; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UN;FH	Master's Level; 2 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UN;IF	Master's Level; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UN;IF;FH	Master's Level; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UN;LI	Master's Level; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UP	Master's Level; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UP;FH	Master's Level; 3 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UP;IF	Master's Level; 3 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UP;IF;FH	Master's Level; 3 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UP;LI	Master's Level; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UQ	Master's Level; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UQ;FH	Master's Level; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UQ;IF	Master's Level; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UQ;IF;FH	Master's Level; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UQ;LI	Master's Level; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UR	Master's Level; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UR;FH	Master's Level; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UR;IF	Master's Level; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UR;IF;FH	Master's Level; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;UR;LI	Master's Level; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;US	Master's Level; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;US;FH	Master's Level; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;US;IF	Master's Level; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;US;IF;FH	Master's Level; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HO;US;LI	Master's Level; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP	Doctoral Level; Individual member served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;FH	Doctoral Level; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;IF	Doctoral Level; Individual member served. Infant Mental Health.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;IF;FH	Doctoral Level; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;LI	Doctoral Level; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UN	Doctoral Level; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UN;FH	Doctoral Level; 2 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UN;IF	Doctoral Level; 2 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UN;IF;FH	Doctoral Level; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UN;LI	Doctoral Level; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UP	Doctoral Level; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UP;FH	Doctoral Level; 3 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UP;IF	Doctoral Level; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UP;IF;FH	Doctoral Level; 3 members served. Infant Mental Health. Face To Face Only.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UP;LI	Doctoral Level; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UQ	Doctoral Level; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UQ;FH	Doctoral Level; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UQ;IF	Doctoral Level; 4 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UQ;IF;FH	Doctoral Level; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UQ;LI	Doctoral Level; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UR	Doctoral Level; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UR;FH	Doctoral Level; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UR;IF	Doctoral Level; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UR;IF;FH	Doctoral Level; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;UR;LI	Doctoral Level; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;US	Doctoral Level; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;US;FH	Doctoral Level; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;US;IF	Doctoral Level; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;US;IF;FH	Doctoral Level; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	HP;US;LI	Doctoral Level; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD	Registered Nurse; Individual member served.	15 Minutes	\$77.18



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;FH	Registered Nurse; Individual member served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;IF	Registered Nurse; Individual member served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;IF;FH	Registered Nurse; Individual member served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;LI	Registered Nurse; Individual member served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UN	Registered Nurse; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UN;FH	Registered Nurse; 2 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UN;IF	Registered Nurse; 2 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UN;IF;FH	Registered Nurse; 2 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UN;LI	Registered Nurse; 2 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UP	Registered Nurse; 3 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UP;FH	Registered Nurse; 3 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UP;IF	Registered Nurse; 3 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UP;IF;FH	Registered Nurse; 3 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UP;LI	Registered Nurse; 3 members served. Hospital Discharge Planning.	15 Minutes	\$39.91



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UQ	Registered Nurse; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UQ;FH	Registered Nurse; 4 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UQ;IF	Registered Nurse; 4 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UQ;IF;FH	Registered Nurse; 4 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UQ;LI	Registered Nurse; 4 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UR	Registered Nurse; 5 members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UR;FH	Registered Nurse; 5 members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UR;IF	Registered Nurse; 5 members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UR;IF;FH	Registered Nurse; 5 members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;UR;LI	Registered Nurse; 5 members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;US	Registered Nurse; 6 or more members served.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;US;FH	Registered Nurse; 6 or more members served. Face To Face ONLY.	15 Minutes	\$79.81
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;US;IF	Registered Nurse; 6 or more members served. Infant Mental Health.	15 Minutes	\$77.18
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;US;IF;FH	Registered Nurse; 6 or more members served. Infant Mental Health. Face To Face ONLY.	15 Minutes	\$79.81



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H0036 - Community Psychiatric Supportive Treatment, Face-To-Face	TD;US;LI	Registered Nurse; 6 or more members served. Hospital Discharge Planning.	15 Minutes	\$39.91
H0038 - Self Help/Peer Services	N/A	Authorization only code.	15 Minutes	\$0.00
H0038 - Self Help/Peer Services	WS	Certified Peer Specialist; Individual member served.	15 Minutes	\$9.38
H0038 - Self Help/Peer Services	WS;UN	Certified Peer Specialist; 2 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WS;UP	Certified Peer Specialist; 3 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WS;UQ	Certified Peer Specialist; 2 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WS;UR	Certified Peer Specialist; 5 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WS;US	Certified Peer Specialist; 6 or more patients served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WT	Youth Peer Specialist; Individual member served.	15 Minutes	\$9.38
H0038 - Self Help/Peer Services	WT;UN	Youth Peer Specialist; 2 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WT;UP	Youth Peer Specialist; 3 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WT;UQ	Youth Peer Specialist; 4 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WT;UR	Youth Peer Specialist; 5 members served.	15 Minutes	\$3.33
H0038 - Self Help/Peer Services	WT;US	Youth Peer Specialist; 6 or more members served.	15 Minutes	\$3.33
H0045 - Respite Care Services, not in the home, licensed residential setting.	HM	Less than Bachelor's Level	Day	\$165.38
H2000 - Behavioral Management Review	N/A	Authorization Only code; Behavioral Mgmt Review.	Encounter	\$0.00
H2000 - Behavioral Management Review	AF	(Specialty Physician/Psychiatrist)	Encounter	\$121.28
H2000 - Behavioral Management Review	AG	(Physician)	Encounter	\$121.28
H2000 - Behavioral Management Review	AH	(Clinical Psychologist)	Encounter	\$121.28
H2000 - Behavioral Management Review	HP	(Doctoral Level)	Encounter	\$121.28
H2000 - Behavioral Management Review - Monitoring	TS	Authorization Only code; Monitoring of Beh. Plan.	Encounter	\$0.00
H2000 - Behavioral Management Review - Monitoring	TS;AF	Specialty Physician/Psychiatrist; Monitoring of Beh. Plan.	Encounter	\$42.99
H2000 - Behavioral Management Review - Monitoring	TS;AG	Physician; Monitoring of Beh. Plan.	Encounter	\$42.99
H2000 - Behavioral Management Review - Monitoring	TS;AH	Clinical Psychologist; Monitoring of Beh. Plan.	Encounter	\$42.99
H2000 - Behavioral Management Review - Monitoring	TS;HP	Doctoral Level; Monitoring of Beh. Plan.	Encounter	\$42.99
H2011 - Crisis Intervention Services	AF	(Specialty Physician/Psychiatrist)	15 Minutes	\$41.34
H2011 - Crisis Intervention Services	AG	(Physician)	15 Minutes	\$41.34



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H2011 - Crisis Intervention Services	AH	(Clinical Psychologist)	15 Minutes	\$41.34
H2011 - Crisis Intervention Services	HN	(Bachelor's Level)	15 Minutes	\$41.34
H2011 - Crisis Intervention Services	HO	(Master's Level)	15 Minutes	\$41.34
H2011 - Crisis Intervention Services	HP	(Doctoral Level)	15 Minutes	\$41.34
H2011 - Crisis Intervention Services	TD	Registered Nurse	15 Minutes	\$41.34
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	N/A	Authorization only code.	15 Minutes	\$0.00
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM;UN	(Less than Bachelor's Level); 2 patients served.	15 Minutes	\$6.04
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM;UP	(Less than Bachelor's Level); 3 patients served.	15 Minutes	\$6.01
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM;UQ	(Less than Bachelor's Level); 4 patients served.	15 Minutes	\$6.00
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM;UR	(Less than Bachelor's Level); 5 patients served.	15 Minutes	\$5.98
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM;US	(Less than Bachelor's Level); 6 or more patients served.	15 Minutes	\$5.98
H2014 - Skill Building & Training / Out-of-Home Non-Vocational Habilitation (HAB)	HM	(Less than Bachelor's Level); Individual	15 Minutes	\$6.75
H2021 - Intensive Care Coordination with Wraparound	N/A	Authorization only code	15 Minutes	\$0.00
H2021 - Intensive Care Coordination with Wraparound	AF, AG, AH, HN, HO, HP, SA, TD	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's level; Master's Level; Doctorial; PA,NP,CNS; Registered Nurse	15 Minutes	\$89.02
H2021 - Intensive Care Coordination with Wraparound	AF, AG, AH, HN, HO, HP, SA, TD with FH	Specialty Physician/Psychiatrist; Physician; Clinical Psychologist; Bachelor's level; Master's Level; Doctorial; PA,NP,CNS; Registered Nurse Face to Face with parent and/or child	15 Minutes	\$91.26
H2021 - Specialized Wraparound Facilitation	AF;LI	Specialty Physician; Psychiatrist. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	AG;LI	Physician. Hospital Discharge Planning.	15 Minutes	\$53.68



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
H2021 - Specialized Wraparound Facilitation	AH;LI	Clinical Psychologist. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	HN;LI	Bachelor's Level. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	HO;LI	Master's Level. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	HP;LI	Doctoral Level. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	TD;LI	Registered Nurse. Hospital Discharge Planning.	15 Minutes	\$53.68
H2021 - Specialized Wraparound Facilitation	SA;LI	PA, NP, CNS. Hospital Discharge Planning.	15 Minutes	\$53.68
H2033 - Multi-Systemic Therapy in Home-Based Program.	N/A	Authorization Only code for Home-Based Services.	15 Minutes	\$0.00
H2033 - Multi-Systemic Therapy in Home-Based Program.	AF	Specialty physician; Psychiatrist.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	AG	Physician.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	AH	Clinical Psychologist.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	HN	Bachelor's Level.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	HO	Master's Level.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	HP	Doctoral Level.	15 Minutes	\$115.77
H2033 - Multi-Systemic Therapy in Home-Based Program.	TD	Registered Nurse.	15 Minutes	\$115.77
S5111 - Family Training	N/A	Authorization only code.	Encounter	\$0.00
S5111 - Family Training	AE	Dietician; Individual member served.	Encounter	\$203.97
S5111 - Family Training	AE;UN	Dietician; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	AE;UP	Dietician; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	AE;UQ	Dietician; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	AE;UR	Dietician; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	AE;US	Dietician; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	AF	Specialty Physician/Psychiatrist; Individual member served.	Encounter	\$203.97
S5111 - Family Training	AF;UN	Specialty Physician/Psychiatrist; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	AF;UP	Specialty Physician/Psychiatrist; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	AF;UQ	Specialty Physician/Psychiatrist; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	AF;UR	Specialty Physician/Psychiatrist; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	AF;US	Specialty Physician/Psychiatrist; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	AG	Physician; Individual member served.	Encounter	\$203.97
S5111 - Family Training	AG;UN	Physician; 2 patients served.	Encounter	\$203.97



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
S5111 - Family Training	AG;UP	Physician; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	AG;UQ	Physician; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	AG;UR	Physician; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	AG;US	Physician; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	AH	Clinical Psychologist; Individual member served.	Encounter	\$203.97
S5111 - Family Training	AH;UN	Clinical Psychologist; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	AH;UP	Clinical Psychologist; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	AH;UQ	Clinical Psychologist; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	AH;UR	Clinical Psychologist; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	AH;US	Clinical Psychologist; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	CO	Occupational Therapist Assistant; Individual member served.	Encounter	\$203.97
S5111 - Family Training	CO;UN	Occupational Therapist Assistant; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	CO;UP	Occupational Therapist Assistant; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	CO;UQ	Occupational Therapist Assistant; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	CO;UR	Occupational Therapist Assistant; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	CO;US	Occupational Therapist Assistant; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	CQ	Physical Therapist Assistant; Individual member served.	Encounter	\$203.97
S5111 - Family Training	CQ;UN	Physical Therapist Assistant; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	CQ;UP	Physical Therapist Assistant; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	CQ;UQ	Physical Therapist Assistant; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	CQ;UR	Physical Therapist Assistant; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	CQ;US	Physical Therapist Assistant; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	HM	Less than Bachelor's Level; Individual member served.	Encounter	\$203.97
S5111 - Family Training	HM;UN	Less than Bachelor's Level; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	HM;UP	Less than Bachelor's Level; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	HM;UQ	Less than Bachelor's Level; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	HM;UR	Less than Bachelor's Level; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	HM;US	Less than Bachelor's Level; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	HN	Bachelor's Level; Individual member served.	Encounter	\$203.97



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
S5111 - Family Training	HN;UN	Bachelor's Level; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	HN;UP	Bachelor's Level; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	HN;UQ	Bachelor's Level; 4 members served.	Encounter	\$203.97
S5111 - Family Training	HN;UR	Bachelor's Level; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	HN;US	Bachelor's Level; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	HO	Master's Level; Individual member served.	Encounter	\$203.97
S5111 - Family Training	HO;UN	Master's Level; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	HO;UP	Master's Level; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	HO;UQ	Master's Level; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	HO;UR	Master's Level; 5 members served.	Encounter	\$203.97
S5111 - Family Training	HO;US	Master's Level; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	HP	Doctoral Level; Individual member served.	Encounter	\$203.97
S5111 - Family Training	HP;UN	Doctoral Level; 2 members served.	Encounter	\$203.97
S5111 - Family Training	HP;UP	Doctoral Level; 3 members served.	Encounter	\$203.97
S5111 - Family Training	HP;UQ	Doctoral Level; 4 members served.	Encounter	\$203.97
S5111 - Family Training	HP;UR	Doctoral Level; 5 members served.	Encounter	\$203.97
S5111 - Family Training	HP;US	Doctoral Level; 6 or more members served.	Encounter	\$203.97
S5111 - Family Training	SA	PA, NP, CNS; Individual member served.	Encounter	\$203.97
S5111 - Family Training	SA;UN	PA, NP, CNS; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	SA;UP	PA, NP, CNS; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	SA;UQ	PA, NP, CNS; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	SA;UR	PA, NP, CNS; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	SA;US	PA, NP, CNS; 6 or more patients served.	Encounter	\$203.97
S5111 - Family Training	TD	Registered Nurse; Individual member served.	Encounter	\$203.97
S5111 - Family Training	TD;UN	Registered Nurse; 2 patients served.	Encounter	\$203.97
S5111 - Family Training	TD;UP	Registered Nurse; 3 patients served.	Encounter	\$203.97
S5111 - Family Training	TD;UQ	Registered Nurse; 4 patients served.	Encounter	\$203.97
S5111 - Family Training	TD;UR	Registered Nurse; 5 patients served.	Encounter	\$203.97
S5111 - Family Training	TD;US	Registered Nurse; 6 or more patients served.	Encounter	\$203.97



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
S5111 - Family Training	WP	Trained Parent; Individual member served.	Encounter	\$206.21
S5111 - Family Training	WP;UN	Trained Parent; 2 patients served.	Encounter	\$206.21
S5111 - Family Training	WP;UP	Trained Parent; 3 patients served.	Encounter	\$206.21
S5111 - Family Training	WP;UQ	Trained Parent; 4 patients served.	Encounter	\$206.21
S5111 - Family Training	WP;UR	Trained Parent; 5 patients served.	Encounter	\$206.21
S5111 - Family Training	WP;US	Trained Parent; 6 or more patients served.	Encounter	\$206.21
S944X - Patient Education - Bundled Authorization code for S9445.	N/A	Bundle Authorization Only Code for S9445-NoMod (In-Office) and S9445-12 (In-Home).	Encounter	\$0.00
S9445 - Patient Education, NOC, Non-Physician, Individual - In Office	AE	Registered Dietician	Encounter	\$82.69
S9445 - Patient Education, NOC, Non-Physician, Individual - In Office	SA	PA, NP, CNS	Encounter	\$82.69
S9445 - Patient Education, NOC, Non-Physician, Individual - In Office	TD	Registered Nurse	Encounter	\$82.69
S9446 - Patient Education, NOC, Non-Physician, Group	N/A	Authorization only code.	Encounter	\$0.00
S9446 - Patient Education, NOC, Non-Physician, Group	AE	Registered Dietician	Encounter	\$55.12
S9446 - Patient Education, NOC, Non-Physician, Group	SA	PA, NP, CNS	Encounter	\$55.12
S9446 - Patient Education, NOC, Non-Physician, Group	TD	Registered Nurse	Encounter	\$55.12
T100X - Nursing Assessment - Bundled Authorization only code for T1001.	N/A	Bundle Authorization Only Code for T1001-NoMod and T1001-12(In-Home).	Encounter	\$0.00
T1001 - Nursing Assessment - In Office	SA	PA, NP,CNS	Encounter	\$115.77
T1001 - Nursing Assessment - In Office	TD	Registered Nurse	Encounter	\$115.77
T1002 - RN services	N/A	Authorization only code.	Up to 15 min	\$0.00
T1002 - RN services	TD	Registered Nurse	Up to 15 min	\$41.34
T1005 - Respite	N/A	Authorization only code.	Up to 15 min	\$0.00
T1005 - Respite	HM	Less than Bachelor's Level; Individual member served.	Up to 15 min	\$7.22
T1005 - Respite	HM;UN	Less than Bachelor's Level; 2 patients served.	Up to 15 min	\$7.13
T1005 - Respite	HM;UP	Less than Bachelor's Level; 3 patients served.	Up to 15 min	\$7.10
T1005 - Respite	HM;UQ	Less than Bachelor's Level; 4 patients served.	Up to 15 min	\$7.09



Contract Program: MH Child Outpatient Services

Effective Date: Rates effective 10/1/2025

Code Description	Modifiers	Notes	Unit Type	Rate
T1005 - Respite	HM;UR	Less than Bachelor's Level; 5 patients served.	Up to 15 min	\$7.07
T1005 - Respite	HM;US	Less than Bachelor's Level; 6 or more patients served.	Up to 15 min	\$7.07
T1017 - Targeted Case Management	LI	Authorization Only code - Hospital Liaison Services	15 Minutes	\$0.00
T1017 - Targeted Case Management	N/A	Authorization only code.	15 Minutes	\$0.00
T1017 - Targeted Case Management	AE;LI	Dietician - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	AF;LI	(Specialty Physician/Psychiatrist) - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	AG;LI	Physician - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	AH;LI	Clinical Psychologist - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	HM;LI	Less than Bachelor's Level - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	HN;LI	Bachelor's Level - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	HO;LI	Master's Level - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	HP;LI	Doctoral Level - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	SA;LI	PA,NP CNS - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	TD;LI	Registered Nurse - Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	WQ;LI	Independent Facilitator -Hospital Liaison Services	15 Minutes	\$41.34
T1017 - Targeted Case Management	AE	Dietician	15 Minutes	\$82.69
T1017 - Targeted Case Management	AF	(Specialty Physician/Psychiatrist)	15 Minutes	\$82.69
T1017 - Targeted Case Management	AG	Physician	15 Minutes	\$82.69
T1017 - Targeted Case Management	AH	Clinical Psychologist	15 Minutes	\$82.69
T1017 - Targeted Case Management	HM	Less than Bachelor's Level	15 Minutes	\$82.69
T1017 - Targeted Case Management	HN	Bachelor's Level	15 Minutes	\$82.69
T1017 - Targeted Case Management	HO	Master's Level	15 Minutes	\$82.69
T1017 - Targeted Case Management	HP	Doctoral Level	15 Minutes	\$82.69
T1017 - Targeted Case Management	SA	PA,NP CNS	15 Minutes	\$82.69
T1017 - Targeted Case Management	TD	Registered Nurse	15 Minutes	\$82.69
T1017 - Targeted Case Management	WQ	Independent Facilitator	15 Minutes	\$82.69
T1999 - Miscellaneous Therapeutic Items & Supplies, NOC (Not available through State Plan Section 7, Michigan Pharmaceutical Product list, MPM.	N/A	Variable rate; Send to rate setting queue.	Item	\$0.00