

St. Clair County CMHA
Rate Schedule
BASED ON ACTUAL DATA 10/01/23 - 9/30/24
Effective 4/1/2025

3.920419984

| CPT CD | SERVICE DESC | UNIT TYPE | Posted Rate |
|---------|---|----------------------|-------------|
| | Exposure adaptive behavior treatment with protocol modification requiring two or more technicians | | |
| 0373T | for severe maladaptive behavior(s), face-to-face | 15 Minutes | \$ 32.63 |
| 90785 | Interactive Complexity | Encounter | \$ 257.62 |
| 90791 | Psychiatric diagnostic evaluation (no medical services) | Encounter | \$ 348.31 |
| 90792 | Psychiatric diagnostic evaluation (with medical services) | Encounter | \$ 766.04 |
| 90832 | 30 minutes of psychotherapy | 30 Minutes | \$ 154.59 |
| 90834 | 45 minutes of psychotherapy | 45 Minutes | \$ 245.65 |
| 90837 | 60 minutes of psychotherapy | 60 Minutes | \$ 333.82 |
| 90839 | Crisis Psychotherapy 60 Minutes | First 30-74 Min. | \$ 182.94 |
| 90846 | Family therapy, per session | 50 Minutes | \$ 297.76 |
| 90847 | Family psychotherapy (conjoint psychotherapy) | 50 Minutes | \$ 293.68 |
| 90853UN | Group therapy, adult or child, per session - 2 patients served | Encounter | \$ 175.06 |
| 90853UP | Group therapy, adult or child, per session - 3 patients served | Encounter | \$ 120.99 |
| 90853UQ | Group therapy, adult or child, per session - 4 patients served | Encounter | \$ 95.32 |
| 90853UR | Group therapy, adult or child, per session - 5 patients served | Encounter | \$ 74.82 |
| 90853US | Group therapy, adult or child, per session - 6 or more patients served | Encounter | \$ 62.08 |
| 90870 | Electroconvulsive Therapy | Encounter | \$ 1,269.13 |
| 96112 | Developmental test administration | First Hour | \$ 553.21 |
| 96116 | Neurobehavioral status exam - Psychologist | Per Hour | \$ 357.56 |
| 96121 | Neurobehavioral status exam - Psychologist | Each Additional Hour | \$ 442.58 |
| 96130 | Psychological testing | First Hour | \$ 161.57 |
| 96131 | Psychological testing | Each Additional Hour | \$ 175.73 |
| 96136 | Psychological or neuropsychological testing | First 30 Minutes | \$ 136.58 |
| | | Each Additional 30 | |
| 96137 | Psychological or neuropsychological testing | Minutes | \$ 113.47 |
| | Therapeutic, prophylactic, or diagnostic injection. Report using this procedure code only when | | |
| 96372 | provided as a separate service | Encounter | \$ 102.97 |
| 97110 | Therapeutic procedure, one or more areas | 15 Minutes | \$ 364.73 |
| 97116 | Gait training (includes stair climbing) | 15 Minutes | \$ 389.23 |
| | Behavior identification assessment by a qualified provider face to face with the individual and | | |
| 97151 | caregiver(s); includes interpretation of results and development of the behavioral plan of care | 15 Minutes | \$ 82.22 |
| | Behavior identification assessment by a qualified provider face to face with the individual and | | |
| 97151U5 | caregiver(s); includes interpretation of results and development of the behavioral plan of care - | | |
| 97153 | Autism | 15 Minutes | \$ 35.35 |
| | Adaptive behavior treatment by protocol, face to face with one individual | 15 Minutes | \$ 15.70 |
| 97155 | Clinical observation & direction of adaptive behavior treatment with protocol modification | 15 Minutes | \$ 35.37 |
| 97156 | Family behavior treatment guidance administered by qualified professional | 15 Minutes | \$ 35.62 |
| 97165 | OT evaluation/re-evaluation | Encounter | \$ 1,256.90 |
| 97166 | OT evaluation/re-evaluation | Encounter | \$ 1,347.96 |
| 97167 | OT evaluation/re-evaluation | Encounter | \$ 1,726.25 |
| 97530 | Therapeutic activities, direct | 15 Minutes | \$ 360.07 |
| 97533 | Sensory integrative techniques | 15 Minutes | \$ 362.59 |
| 97535 | Self-care/home management training | 15 Minutes | \$ 360.35 |
| 97542 | Wheelchair management/propulsion training | 15 Minutes | \$ 362.72 |
| 97550 | Caregiver training without the patient present | 30 Minutes | \$ 741.98 |
| 97551 | Add on Code for 97550, each additional 15 minutes | 15 Minutes | \$ 364.91 |
| 97802 | Medical nutrition therapy; initial assessment and intervention | 15 Minutes | \$ 77.89 |
| 99203 | New Patient 30-44 Minutes | Encounter | \$ 621.71 |
| 99204 | New Patient 45-59 Minutes | Encounter | \$ 707.16 |
| 99205 | New Patient 60-74 Minutes | Encounter | \$ 775.68 |
| 99212 | Established Patient 10-19 Minutes | Encounter | \$ 206.92 |
| 99213 | Established Patient 20-29 Minutes | Encounter | \$ 305.84 |
| 99214 | Established Patient 30-39 Minutes | Encounter | \$ 336.43 |
| 99215 | Established Patient 40-54 Minutes | Encounter | \$ 358.74 |
| 99347 | Home Visit - Established Patient - 20 Minutes | Encounter | \$ 179.91 |
| 99348 | Home Visit - Established Patient - 30 Minutes | Encounter | \$ 194.48 |
| 99349 | Home Visit - Established Patient - 40 Minutes | Encounter | \$ 210.04 |

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|---------|---|----------------------|-----------------|
| 99417 | Prolonged E&M | Encounter | \$ 4.92 |
| E1399 | DME, miscellaneous | Item | Specific Amount |
| H0001 | Alcohol and/or drug assessment (done by provider) | Encounter | \$ 555.10 |
| H0004 | Behavioral health counseling and therapy | 15 Minutes | \$ 49.79 |
| H0005UN | Alcohol and/or drug services; group counseling by a clinician - 2 patients served | Encounter | \$ 5.48 |
| H0006 | Services provided to link clients to other essential medical, social and/or other services. | Encounter | \$ 90.90 |
| H0018 | Alcohol and/or drug services; short term residential | Day | Specific Amount |
| H0025 | Behavioral health prevention education service (delivery of services with target population to affect knowledge, attitude, and/or behavior) | Face to Face Contact | \$ 174.94 |
| H0031 | Mental health assessment, by non-physician | Encounter | \$ 164.28 |
| H0031WX | Mental health assessment, by non-physician - LOCUS Assessment | Encounter | \$ 219.09 |
| H0032 | Mental health service plan development by non-physician | Encounter | \$ 229.86 |
| H0032TS | Mental health service plan development by non-physician - Monitoring Treatment Plans | Encounter | \$ 99.45 |
| H0036 | Community psychiatric supportive treatment | 15 Minutes | \$ 68.05 |
| H0036ST | Community psychiatric supportive treatment - Related to trauma or injury | 15 Minutes | \$ 101.60 |
| H0036UN | Community psychiatric supportive treatment - 2 patients served | 15 Minutes | \$ 33.46 |
| H0036UP | Community psychiatric supportive treatment - 3 patients served | 15 Minutes | \$ 21.44 |
| H0036UQ | Community psychiatric supportive treatment - 4 patients served | 15 Minutes | \$ 18.88 |
| H0036UR | Community psychiatric supportive treatment - 5 patients served | 15 Minutes | \$ 15.67 |
| H0036US | Community psychiatric supportive treatment - 6 or more patients served | 15 Minutes | \$ 14.85 |
| H0038 | Peer-specialist | 15 Minutes | \$ 76.80 |
| H0038UN | Peer-specialist - 2 patients served | 15 Minutes | \$ 45.45 |
| H0038UP | Peer-specialist - 3 patients served | 15 Minutes | \$ 28.85 |
| H0038UQ | Peer-specialist - 4 patients served | 15 Minutes | \$ 22.73 |
| H0038UR | Peer-specialist - 5 patients served | 15 Minutes | \$ 19.05 |
| H0038US | Peer-specialist - 6 or more patients served | 15 Minutes | \$ 17.14 |
| H0039 | ACT | 15 Minutes | \$ 101.03 |
| H0045 | Respite out-of-home | Day | Specific Amount |
| H0046 | Peer mentor services provided by a DD peer mentor | Encounter | \$ 359.10 |
| H0050 | Outpatient alcohol/other drug treatment services (brief intervention) | 15 Minutes | \$ 21.09 |
| H2000 | Comprehensive multidisciplinary evaluation | Encounter | \$ 1.51 |
| H2011 | Crisis intervention service | 15 Minutes | \$ 396.57 |
| H2014 | Skills training and development | 15 minutes | \$ 13.30 |
| H2014UN | Skills training and development - 2 patients served | 15 minutes | \$ 23.92 |
| H2014UP | Skills training and development - 3 patients served | 15 minutes | \$ 14.20 |
| H2014UQ | Skills training and development - 4 patients served | 15 minutes | \$ 6.46 |
| H2014UR | Skills training and development - 5 patients served | 15 minutes | \$ 5.96 |
| H2014US | Skills training and development - 6 or more patients served | 15 minutes | \$ 5.30 |
| H2015 | Comprehensive Community Support Services | 15 Minutes | \$ 11.04 |
| H2015UJ | Comprehensive Community Support Services - Overnight Health & Safety | 15 Minutes | \$ 5.30 |
| H2015UN | Comprehensive Community Support Services - 2 patients served | 15 Minutes | \$ 8.97 |
| H2015UP | Comprehensive Community Support Services - 3 patients served | 15 Minutes | \$ 7.18 |
| H2015UQ | Comprehensive Community Support Services - 4 patients served | 15 Minutes | \$ 7.03 |
| H2015UR | Comprehensive Community Support Services - 5 patients served | 15 Minutes | \$ 6.94 |
| H2015US | Comprehensive Community Support Services - 6 or more patients served | 15 Minutes | \$ 6.43 |
| H2016 | Community Living Supports | Per Diem | Specific Amount |
| H2019 | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) | 15 Minutes | \$ 85.50 |
| H2019UN | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 2 patients served | 15 Minutes | \$ 41.90 |
| H2019UP | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 3 patients served | 15 Minutes | \$ 27.86 |
| H2019UQ | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 4 patients served | 15 Minutes | \$ 20.75 |
| H2019UR | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 5 patients served | 15 Minutes | \$ 16.46 |
| H2019US | Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 6 or more patients served | 15 Minutes | \$ 13.77 |
| H2021 | Specialize Wraparound Facilitation | 15 Minutes | \$ 146.36 |
| H2022 | Community-based Wrap-Around services | Day | \$ 522.38 |
| H20231Y | Supported employment - Career planning/discovery | 15 Minutes | \$ 102.91 |
| H20232Y | Supported employment - Job Development/placement | 15 Minutes | \$ 91.59 |
| H20234Y | Supported employment - Financial planning | 15 Minutes | \$ 113.49 |
| H2023Y5 | Supported employment - Individual placement support/EBP | 15 Minutes | \$ 112.86 |
| H2025 | Job Coaching | 15 Minutes | \$ 6.89 |
| H2030 | Mental Health Clubhouse | 15 Minutes | \$ 14.25 |
| S5111 | Home care training, family per session | Encounter | \$ 262.14 |
| S5111UN | Home care training, family per session - 2 patients served | Encounter | \$ 193.64 |
| S5111UP | Home care training, family per session - 3 patients served | Encounter | \$ 149.74 |

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|---------|---|--------------------------------------|----|-----------------|
| S5111UQ | Home care training, family per session - 4 patients served | Encounter | \$ | 112.30 |
| S5111UR | Home care training, family per session - 5 patients served | Encounter | \$ | 81.52 |
| S5111US | Home care training, family per session - 6 or more patients served | Encounter | \$ | 67.93 |
| S5165 | Home modifications, per service. | Service | | Specific Amount |
| S9124 | Nursing care, in the home, by licensed practical nurse | Hour | \$ | 55.60 |
| S9445 | Pt education NOC nonphysician indiv per session | Encounter | \$ | 279.81 |
| S9446 | Pt education NOC nonphysician group, per session | Encounter | \$ | 486.02 |
| S9470 | Nutritional counseling dietician visit | Encounter | \$ | 219.18 |
| S9482 | Infant Mental Health | 15 minutes | \$ | 74.16 |
| T1001 | Nursing/Nutrition Assessment | Encounter | \$ | 73.22 |
| T1002 | RN services | Up to 15 min | \$ | 69.49 |
| T1005 | Respite care services | 15 Minutes | \$ | 7.72 |
| T1005UN | Respite care services - 2 patients served | 15 Minutes | \$ | 6.05 |
| T1005UP | Respite care services - 3 patients served | 15 Minutes | \$ | 5.82 |
| T1007 | Alcohol and/or substance abuse services, Treatment Plan development and/or modification | Encounter | \$ | 49.23 |
| T1017 | Targeted Case management (face to face) & Supports Coordination | 15 minutes | \$ | 158.26 |
| T1020 | Personal Care- Licensed Specialized Residential | Day | | Specific Amount |
| T1023 | Screening for inpatient programs | Encounter | \$ | 2,929.48 |
| T1999 | Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in "remarks" | Item | | Specific Amount |
| T2025 | Use for services performed by a fiscal intermediary. | Month | \$ | 152.03 |
| T2027 | Overnight Health and Safety | 15 Minutes | \$ | 9.30 |
| T2027UN | Overnight Health and Safety - 2 patients served | 15 Minutes | \$ | 5.58 |
| T2028 | Specialized supply, not otherwise specified, waiver (allergy control supplies) | Item | | Specific Amount |
| T2036 | Therapeutic camping overnight.(one night = one session) | Per session. One night = one session | \$ | 153.60 |
| T2038 | Community transition, waiver, per service | Service | \$ | 721.11 |
| T2039 | Van lifts & wheelchair tie down system | Item | | Specific Amount |