

St. Clair County CMHA  
Rate Schedule  
BASED ON ACTUAL DATA 10/01/24 - 9/30/25  
Effective 4/1/2026

3.926488552

CPT CD	SERVICE DESC	UNIT TYPE	Posted Rate
0373T	Exposure adaptive behavior treatment with protocol modification requiring two or more technicians for severe maladaptive behavior(s), face-to-face	15 Minutes	\$ 33.05
90785	Interactive Complexity	Encounter	\$ 413.07
90791	Psychiatric diagnostic evaluation (no medical services)	Encounter	\$ 380.85
90792	Psychiatric diagnostic evaluation (with medical services)	Encounter	\$ 791.39
90832	30 minutes of psychotherapy	30 Minutes	\$ 164.65
90834	45 minutes of psychotherapy	45 Minutes	\$ 260.61
90837	60 minutes of psychotherapy	60 Minutes	\$ 341.06
90839	Crisis Psychotherapy 60 Minutes	First 30-74 Min.	\$ 289.61
90840	Crisis Psychotherapy add on 30 minutes	Each Additional 30 Minutes	\$ 170.73
90846	Family therapy, per session	50 Minutes	\$ 305.93
90847	Family psychotherapy (conjoint psychotherapy)	50 Minutes	\$ 315.65
90853UN	Group therapy, adult or child, per session - 2 patients served	Encounter	\$ 202.85
90853UP	Group therapy, adult or child, per session - 3 patients served	Encounter	\$ 140.81
90853UQ	Group therapy, adult or child, per session - 4 patients served	Encounter	\$ 105.94
90853UR	Group therapy, adult or child, per session - 5 patients served	Encounter	\$ 92.13
90853US	Group therapy, adult or child, per session - 6 or more patients served	Encounter	\$ 71.36
92526	Speech & language therapy, individual	Encounter	\$ 20.39
96116	Neurobehavioral status exam - Psychologist	Per Hour	\$ 411.00
96121	Neurobehavioral status exam - Psychologist	Each Additional Hour	\$ 434.22
96130	Psychological testing	First Hour	\$ 197.65
96131	Psychological testing	Each Additional Hour	\$ 236.62
96136	Psychological or neuropsychological testing	First 30 Minutes	\$ 138.85
96137	Psychological or neuropsychological testing	Each Additional 30 Minutes	\$ 119.76
96372	Therapeutic, prophylactic, or diagnostic injection. Report using this procedure code only when provided as a separate service	Encounter	\$ 138.11
97110	Therapeutic procedure, one or more areas	15 Minutes	\$ 397.65
97151U5	Behavior identification assessment by a qualified provider face to face with the individual and caregiver (s); includes interpretation of results and development of the behavioral plan of care - Autism	15 Minutes	\$ 38.00
97153	Adaptive behavior treatment by protocol, face to face with one individual	15 Minutes	\$ 20.64
97154UN	Group adaptive behavior treatment by protocol, two or more individuals - 2 patients served	15 Minutes	\$ 7.08
97154UP	Group adaptive behavior treatment by protocol, two or more individuals - 3 patients served	15 Minutes	\$ 7.15
97154UQ	Group adaptive behavior treatment by protocol, two or more individuals - 4 patients served	15 Minutes	\$ 7.15
97154UR	Group adaptive behavior treatment by protocol, two or more individuals - 5 patients served	15 Minutes	\$ 7.15
97155	Clinical observation & direction of adaptive behavior treatment with protocol modification	15 Minutes	\$ 38.17
97156	Family behavior treatment guidance administered by qualified professional	15 Minutes	\$ 37.98
97165	OT evaluation/re-evaluation	Encounter	\$ 1,247.47
97166	OT evaluation/re-evaluation	Encounter	\$ 1,374.98
97167	OT evaluation/re-evaluation	Encounter	\$ 2,124.05
97530	Therapeutic activities, direct	15 Minutes	\$ 398.90
97533	Sensory integrative techniques	15 Minutes	\$ 403.38
97535	Self-care/home management training	15 Minutes	\$ 397.52
97542	Wheelchair management/propulsion training	15 Minutes	\$ 395.98
97550	Caregiver training without the patient present	30 Minutes	\$ 812.59
97551	Add on Code for 97550, each additional 15 minutes	15 Minutes	\$ 398.13
97802	Medical nutrition therapy; initial assessment and intervention	15 Minutes	\$ 92.21
99203	New Patient 30-44 Minutes	Encounter	\$ 708.87
99204	New Patient 45-59 Minutes	Encounter	\$ 698.45
99205	New Patient 60-74 Minutes	Encounter	\$ 730.31
99211	Established Patient	Encounter	\$ 47.14
99212	Established Patient 10-19 Minutes	Encounter	\$ 303.47
99213	Established Patient 20-29 Minutes	Encounter	\$ 306.45
99214	Established Patient 30-39 Minutes	Encounter	\$ 349.49

99215	Established Patient 40-54 Minutes	Encounter	\$	398.24
99347	Home Visit - Established Patient - 20 Minutes	Encounter	\$	195.91
99417	Prolonged E&M	Encounter	\$	271.52
99441	Telephone Evaluation and Management Service	Encounter	\$	191.87
E1399	DME, miscellaneous (single room air conditioner)	Item		Specific Amount
H0001	Alcohol and/or drug assessment (done by provider)	Encounter	\$	520.45
H0004	Behavioral health counseling and therapy	15 Minutes	\$	53.68
H0005US	Alcohol and/or drug services; group counseling by a clinician - 6 or more patients served	Encounter	\$	71.14
H0006	Services provided to link clients to other essential medical, social and/or other services.	Encounter	\$	82.45
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	\$	181.22
H0031	Mental health assessment, by non-physician	Encounter	\$	201.20
H0031WX	Mental health assessment, by non-physician - LOCUS Screening	Encounter	\$	210.16
H0032	Mental health service plan development by non-physician	Encounter	\$	257.29
H0032TS	Mental health service plan development by non-physician - Monitoring Treatment Plans	Encounter	\$	117.67
H0034	Medication training and support	15 Minutes	\$	125.09
H0036	Community psychiatric supportive treatment	15 Minutes	\$	65.23
H0036ST	Community psychiatric supportive treatment - Related to trauma or injury	15 Minutes	\$	106.60
H0036UN	Community psychiatric supportive treatment - 2 patients served	15 Minutes	\$	39.70
H0036UP	Community psychiatric supportive treatment - 3 patients served	15 Minutes	\$	18.92
H0036UQ	Community psychiatric supportive treatment - 4 patients served	15 Minutes	\$	13.51
H0036UR	Community psychiatric supportive treatment - 5 patients served	15 Minutes	\$	16.62
H0036US	Community psychiatric supportive treatment - 6 or more patients served	15 Minutes	\$	13.61
H0038	Peer-specialist	15 Minutes	\$	99.60
H0038UN	Peer-specialist - 2 patients served	15 Minutes	\$	48.11
H0038UP	Peer-specialist - 3 patients served	15 Minutes	\$	31.85
H0038UQ	Peer-specialist - 4 patients served	15 Minutes	\$	23.42
H0038UR	Peer-specialist - 5 patients served	15 Minutes	\$	18.93
H0038US	Peer-specialist - 6 or more patients served	15 Minutes	\$	15.75
H0039	ACT	15 Minutes	\$	83.59
H0045	Respite out-of-home	Day		Specific Amount
H0046	Peer mentor services provided by a DD peer mentor	Encounter	\$	191.55
H0050	Outpatient alcohol/other drug treatment services (brief intervention)	15 Minutes	\$	22.22
H2000	Comprehensive multidisciplinary evaluation	Encounter	\$	31.90
H2011	Crisis intervention service	15 Minutes	\$	641.87
H2014	Skills training and development	15 minutes	\$	25.73
H2014UN	Skills training and development - 2 patients served	15 minutes	\$	22.30
H2014UP	Skills training and development - 3 patients served	15 minutes	\$	11.48
H2014UQ	Skills training and development - 4 patients served	15 minutes	\$	7.72
H2014UR	Skills training and development - 5 patients served	15 minutes	\$	6.68
H2014US	Skills training and development - 6 or more patients served	15 minutes	\$	5.54
H2015	Comprehensive Community Support Services	15 Minutes	\$	10.58
H2015UJ	Comprehensive Community Support Services - Overnight Health & Safety	15 Minutes	\$	6.41
H2015UN	Comprehensive Community Support Services - 2 patients served	15 Minutes	\$	10.39
H2015UP	Comprehensive Community Support Services - 3 patients served	15 Minutes	\$	8.42
H2015UQ	Comprehensive Community Support Services - 4 patients served	15 Minutes	\$	6.78
H2015UR	Comprehensive Community Support Services - 5 patients served	15 Minutes	\$	6.96
H2015US	Comprehensive Community Support Services - 6 or more patients served	15 Minutes	\$	6.88
H2016	Community Living Supports	Per Diem		Specific Amount
H2019	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT)	15 Minutes	\$	91.89
H2019UN	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 2 patients served	15 Minutes	\$	43.95
H2019UP	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 3 patients served	15 Minutes	\$	28.90
H2019UQ	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 4 patients served	15 Minutes	\$	21.69
H2019UR	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 5 patients served	15 Minutes	\$	17.23
H2019US	Therapeutic Behavioral Services: Use for individual Dialectical Behavior Therapy (DBT) - 6 or more patients served	15 Minutes	\$	14.38
H2021	Specialize Wraparound Facilitation	15 Minutes	\$	126.47
H2022	Community-based Wrap-Around services	Day	\$	455.95
H20231Y	Supported employment - Career planning/discovery	15 Minutes	\$	110.39

H20232Y	Supported employment - Job Development/placement	15 Minutes	\$	111.17
H20234Y	Supported employment - Financial planning	15 Minutes	\$	119.00
H2023Y5	Supported employment - Individual placement support/EBP	15 Minutes	\$	117.93
H2025	Job Coaching	15 Minutes	\$	394.78
H2030	Mental Health Clubhouse	15 Minutes	\$	11.68
S5111	Home care training, family per session	Encounter	\$	288.56
S5111UN	Home care training, family per session - 2 patients served	Encounter	\$	224.25
S5111UP	Home care training, family per session - 3 patients served	Encounter	\$	173.99
S5111UQ	Home care training, family per session - 4 patients served	Encounter	\$	128.05
S5111UR	Home care training, family per session - 5 patients served	Encounter	\$	95.45
S5111US	Home care training, family per session - 6 or more patients served	Encounter	\$	70.93
S5165	Home modifications, per service.	Service		Specific Amount
S9123	Private duty nursing, habilitation supports waiver (individual nurse only) 21 years and over ONLY	Hour	\$	92.70
S9123UN	Private duty nursing, habilitation supports waiver (individual nurse only) 21 years and over ONLY - 2 patients served	Hour	\$	69.53
S9124	Nursing care, in the home, by licensed practical nurse	Hour	\$	76.24
S9124UN	Nursing care, in the home, by licensed practical nurse - 2 patients served	Hour	\$	59.07
S9446	Pt education NOC nonphysician group, per session	Encounter	\$	385.71
S9446UN	Pt education NOC nonphysician group, per session - 2 patients served	Encounter	\$	309.01
S9446UP	Pt education NOC nonphysician group, per session - 3 patients served	Encounter	\$	188.25
S9446UQ	Pt education NOC nonphysician group, per session - 4 patients served	Encounter	\$	152.35
S9446UR	Pt education NOC nonphysician group, per session - 5 patients served	Encounter	\$	125.59
S9446US	Pt education NOC nonphysician group, per session - 6 or more patients served	Encounter	\$	84.27
S9470	Nutritional counseling dietician visit	Encounter	\$	295.57
S9482	Infant Mental Health	15 minutes	\$	57.86
S9484	Intensive Crisis intervention service	Hour	\$	58.74
T1002	RN services	Up to 15 min	\$	79.32
T1005	Respite care services	15 Minutes	\$	7.93
T1005UN	Respite care services - 2 patients served	15 Minutes	\$	5.87
T1005UP	Respite care services - 3 patients served	15 Minutes	\$	5.85
T1007	Alcohol and/or substance abuse services, Treatment Plan development and/or modification	Encounter	\$	51.12
T1017	Targeted Case management (face to face) & Supports Coordination	15 minutes	\$	147.60
T1020	Personal Care- Licensed Specialized Residential	Day		Specific Amount
T1023	Screening for inpatient programs	Encounter	\$	1,969.64
T1999	Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in "remarks"	Item	\$	553.38
T2025	Use for services performed by a fiscal intermediary.	Month	\$	167.68
T2027	Overnight Health and Safety	15 Minutes	\$	8.11
T2027UN	Overnight Health and Safety - 2 patients served	15 Minutes	\$	6.05
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	\$	243.55
T2038	Community transition, waiver, per service	Service	\$	719.72
T2039	Van lifts & wheelchair tie down system	Item		Specific Amount