Service Desc	Procedure	Rate/Unit
Acute Partial Hospitalization (under 24 hours)	H0035	\$136.73
Ancillary	ANCIL	\$1.00
Assertive Community Treatment, face-to-face per 15 minutes		
(PACT) (Telehealth)	H0039/HW/GT	\$33.28
Assertive Community Treatment,		
face-to-face per 15 minutes (PACT)	H0039/HW	\$33.28
Assertive Community Treatment,		
face-to-face per 15 minutes (U8, ICORT)	H0039/HW/U8	\$29.95
Assertive Community Treatment, face-to-face per 15 minutes		
(U8, ICORT) (Telehealth)	H0039/HW/U8/GT	\$29.95
Bed Hold - Labor & Delivery (Pregnant Only)	BHLD	\$121.00
Brief Behavioral Health Assessment (Screening) (SBIRT)	96127	\$4.57
Community Maintenance - Pre Eval Screening	CMPES	\$250.00
Community Support Services		
(management of the individual) 15 min	H2015	\$18.00
Crisis Diversion/Community Transition Residential		
(Boswell Regional Center, Region 2, Region 8 and Region 9 only)	CDCTR	\$245.84
Crisis Residential	H0018	\$610.59
Crisis Response, Face-to-Face (Modifier HW/HE)	H2011/HW/HE	\$36.30
Crisis Response, Telephone Service (Modifier HW/TF)	H2011/HW/TF	\$26.47
Day Services - Adult - IDD (Non-Medicaid)	S5100	\$4.57
Day Treatment (Child)	H2012	\$38.72
Family Therapy (w/o patient 50 minutes)	90846	\$106.88
Family Therapy (w/patient 50 minutes)	90847	\$110.72
Functional Assessment at Intake	FAI	\$60.50
Functional Re-Assessment	FRA	\$9.68
Generic Buprenorphine (Subutex) 8 mg (30 tablets)	GBSTB	\$56.64
Generic Buprenorphine-naloxone 8 mg (30 film strips)	GBNFS	\$243.56
Generic Buprenorphine-naloxone 8 mg (30 tablets)	GBNTB	\$88.43
Generic Oral Naltrexone 50 mg (30 tablets)	GON50	\$38.56
Group Therapy	90853	\$28.81
High-Intensity Residential Daily Per Diem (Bundled)	PRBND	\$156.22
High-Intensity Residential Daily Per Diem		
(Parenting one child) (Bundled)	PRD1	\$206.22
High-Intensity Residential Daily Per Diem		
(Parenting three children) (Bundled)	PRD3	\$306.22
High-Intensity Residential Daily Per Diem		
(Parenting two children) (Bundled)	PRD2	\$256.22
High-Intensity Residential Daily Per Diem		
(Pregnant) (Parenting 1 child) (Bundled)	PP1	\$227.62
High-Intensity Residential Daily Per Diem		
(Pregnant) (Parenting 2 children) (Bundled)	PP2	\$277.62
High-Intensity Residential Daily Per Diem		
(Pregnant) (Parenting 3 children) (Bundled)	РРЗ	\$327.62
High-Intensity Residential Daily per diem -		
Medicaid Eligible (1 child)	MERD1	\$103.50

High-Intensity Residential Daily per diem -		
Medicaid Eligible (1 child) Pregnant	PPM1	\$124.90
High-Intensity Residential Daily per diem -		Ş124.90
Medicaid Eligible (2 child) Pregnant	PPM2	\$174.90
High-Intensity Residential Daily per diem -		\$174.90
Medicaid Eligible (2 children)	MERD2	\$153.50
High-Intensity Residential Daily per diem -		\$155.50
Medicaid Eligible (3 child) Pregnant	РРМЗ	\$224.90
High-Intensity Residential Daily per diem -	FFIVIS	\$224.90
Medicaid Eligible (3 children)	MERD3	¢202 E0
High-Intensity Residential Daily per diem -	IVIERDS	\$203.50
	PPM	674.00
Medicaid Eligible Pregnant		\$74.90
High-Intensity Residential Daily Per Diem		¢177.00
Pregnant (Bundled)	PPR	\$177.62
High-Intensity Residential per diem -		¢52.50
Medicaid Eligible (non-pregnant)	MERPD	\$53.50
Incentives	INCTV	\$25.00
Insertion of single non-biodegradable implant	11981	\$140.74
Intake/Biopsycho-Social Assessment	H0031	\$133.95
Intensive Outpatient Psychiatric Services	\$9480	\$148.27
IOP Group Therapy Bundled Rate - 2-hour session	IOPB2	\$43.21
IOP Group Therapy Bundled Rate - 3-hour session	IOPB3	\$57.62
IOP Group Therapy Medicaid Supplement - 2-hour session	IOPM2	\$14.40
IOP Group Therapy Medicaid Supplement - 3-hour session	IOPM3	\$28.81
IOP Group Therapy Rate - 1-hour session	IOPT1	\$28.81
Level of Care Intake/Placement Assessment	SUIPA	\$133.95
Level of Care Placement Re-assessment	SUPRA	\$19.36
Low Intensity Residential Daily per diem -		
Medicaid Eligible - Pregnant	LPM	\$74.90
Low-Intensity Residential - One Child Daily Per Diem -		
Vocational Rehab (enrolled in VR)	VOCR1	\$110.00
Low-Intensity Residential - Three Children Daily Per Diem -		
Vocational Rehab (enrolled in VR)	VOCR3	\$210.00
Low-Intensity Residential - Two Children Daily Per Diem -		
Vocational Rehab (enrolled in VR)	VOCR2	\$160.00
Low-Intensity Residential Daily Per Diem		
(Adolescent) (denied VR)	LIRDA	\$60.00
Low-Intensity Residential Daily Per Diem (denied VR)	TRRES	\$135.78
Low-Intensity Residential Daily Per Diem		
(Parenting one child) (denied VR)	TRES1	\$185.78
Low-Intensity Residential Daily Per Diem		
(Parenting three children) (denied VR)	TRES3	\$285.78
Low-Intensity Residential Daily Per Diem		
(Parenting two children) (denied VR)	TRES2	\$235.78
Low-Intensity Residential Daily per diem -		
Medicaid Eligible (non-pregnant)	LIRPD	\$53.50

Low-Intensity Residential Daily per diem -		
Medicaid Eligible - (1 child)	LIRD1	\$103.50
Low-Intensity Residential Daily per diem -		÷105.50
Medicaid Eligible - (1 child) Pregnant	LPM1	\$124.90
Low-Intensity Residential Daily per diem -		
Medicaid Eligible - (2 child) Pregnant	LPM2	\$174.90
Low-Intensity Residential Daily per diem -		<i>\</i>
Medicaid Eligible - (2 children)	LIRD2	\$153.50
Low-Intensity Residential Daily per diem -		+
Medicaid Eligible - (3 child) Pregnant	LPM3	\$224.90
Low-Intensity Residential Daily per diem -		+==
Medicaid Eligible - (3 children)	LIRD3	\$203.50
Low-Intensity Residential Daily Per Diem -		7-000
Vocational Rehab (enrolled in VR)	VOCRH	\$60.00
Low-Intensity Residential Daily Per Diem -		
Vocational Rehab - Pregnant (Bundled) (enrolled in VR)	PPMV	\$74.90
Low-Intensity Residential Daily Per Diem -		
Vocational Rehab -Pregnant (3 children)		
(Bundled) (enrolled in VR)	PPMV3	\$230.00
Low-Intensity Residential Daily Per Diem -		
Vocational Rehab Pregnant (1 child)		
{Bundled) (enrolled in VR)	PPMV1	\$130.00
Low-Intensity Residential Daily Per Diem – Adolescent -		
Vocational Rehab (enrolled in VR)	LIRVA	\$60.00
Low-Intensity Residential Daily Per Diem Pregnant		
(Bundled) (denied VR)	PPRT	\$154.38
Low-Intensity Residential Daily Per Diem Pregnant		
(Parenting 1 child) (Bundled) (denied VR)	PP1T	\$204.38
Low-Intensity Residential Daily Per Diem Pregnant		
(Parenting 2 children) (Bundled) (denied VR)	PP2T	\$254.38
Low-Intensity Residential Daily Per Diem Pregnant		
(Parenting 3 children) (Bundled) (denied VR)	PP3T	\$304.38
Low-Intensity Residential Per Diem -		
Vocational Rehab - Pregnant (2 children)		
(Bundled) (enrolled in VR)	PPMV2	\$180.00
Medical Withdrawal Room and Board per diem (max 5 days)	MWMRB	\$60.50
Medically Managed Intensive Inpatient WM p		
er diem (max 5 days)	MMII	\$605.00
Medication	MEDIC	\$1.00
Medication Administration (per injection)	T1502	\$5.76
Medication Injection	96372	\$14.13
Medium-Intensity Residential Daily Per Diem		
(Adolescent Only)	MIRAO	\$156.22
Medium-Intensity Residential Daily Per Diem		
for Medicaid Eligible Adolescents	MIMEA	\$78.11
Medium-Intensity Residential Daily Per Diem		
Medicaid Eligible Pregnant Adolescent	MIMPA	\$88.81

Madium Interative Desidential Daily Dee Diam		
Medium-Intensity Residential Daily Per Diem		6177 62
Pregnant Adolescent MERC Incentives	MIPA MRCIN	\$177.62
Methadone 5 mg (120 ml)	MT120	\$20.00 \$22.93
	MT30	
Methadone 5 mg (30 ml)		\$15.97
Methadone 5 mg (60 ml)	MT60	\$18.30
Mobile Crisis Services	602	\$36.30
Multi-family Group Therapy	90849	\$36.88
Nursing Assessment (RN services up to 15 minutes)	T1002	\$22.32
Office/Outpatient Visit (Evaluation & Management)		400.00
Current Patients (99211)	99211	\$22.60
Office/Outpatient Visit (Evaluation & Management)		
Current Patients (99212)	99212	\$44.71
Office/Outpatient Visit (Evaluation & Management)		
Current Patients (99213)	99213	\$74.58
Office/Outpatient Visit (Evaluation & Management)		
Current Patients (99214)	99214	\$108.69
Office/Outpatient Visit (Evaluation & Management)		
Current Patients (99215)	99215	\$146.42
Office/Outpatient Visit (Evaluation & Management)		
New Patients (99201)	99201	\$45.04
Office/Outpatient Visit (Evaluation & Management)		
New Patients (99202)	99202	\$75.27
Office/Outpatient Visit (Evaluation & Management)		
New Patients (99203)	99203	\$107.04
Office/Outpatient Visit (Evaluation & Management)		
New Patients (99204)	99204	\$164.51
Office/Outpatient Visit (Evaluation & Management)		
New Patients (99205)	99205	\$208.31
Peer Support, Per 15 Minutes	H0038	\$9.47
Physician	PHYSC	\$1.00
Pre-Evaluation Screening	432	\$15.50
Prevocational Services - IDD (Non-Medicaid)	T2015	\$15.10
Probuphine (buprenorphine) 6-month implant (all 4 rods)	J0570	\$6,003.16
Prolonged Service 30 minutes (add on)	99355	\$100.56
Prolonged Service 60 minutes	99354	\$132.33
Psychiatric Diag Eval w/Medical Services	90792	\$164.17
Psychiatric Diag Eval w/o Medical Services	90791	\$104.17
Psychological Evaluation (each additional 30 minutes)	96137	\$42.98
Psychological Evaluation (each additional hour)	96131	\$95.67
	96136	\$95.67
Psychological Evaluation (first 30 minutes)		
Psychological Evaluation (first hour)	96130	\$124.80
Psychosocial Rehabilitation Services, Per 15 Minutes	H2017	\$4.68
Psychotherapy - (w/pt 30 minutes)	90832	\$72.68
Psychotherapy - (w/pt 45 minutes)	90834	\$96.68
Psychotherapy - (w/pt 60 minutes)	90837	\$144.81
Psychotherapy with E/M (w/pt 30 minutes)	90833	\$74.35

90836 90838	\$94.17 \$123.84
	\$123.84
	÷120.01
Q9991	\$1,925.46
Q9992	\$1,925.46
SUB8M	\$11.78
SUB2M	\$188.30
H2025	\$10.10
H2023	\$10.65
S5135	\$7.67
SRVAD	\$60.50
T1017	\$18.30
T2023/HW/HT	\$1,452.00
T2023/HW/U7	\$182.72
TELMD	\$0.00
H0032	\$22.32
H0003	\$14.65
J2315	\$1,541.14
WM-1	\$60.50
WM-2	\$60.50
WM3.2	\$60.50
WM3.7	\$60.50
WM-4	\$605.00
BHLD4	\$60.50
H2021	\$18.00
ZUBSV	\$315.19
	SUB8M SUB2M H2025 H2023 S5135 SRVAD T1017 T2023/HW/HT T2023/HW/U7 TELMD H0032 H0003 J2315 WM-1 WM-2 WM3.2 WM3.7 WM-4 BHLD4 H2021

3/8/2023