		m Rates- Evaluation and Management Only							
Effective 07/	01/2021 throu	gh 12/31/2021 Provider types / enrollment requirements:	PT20 must have Specialty 52 or 53	PT20, PT23, PT80	PT20 and PT23, PT80	PT23 with PMH and PT24 each must have category of Service 1A	PT15	PT94 and PTCC	PTMC
Procedure Code	If value of field is 'Y', can bill one E&M Code between 99202 and 9215	Service Description	Psychiatrist	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	ОМНС
OUTPATIENT	OFFICE PROF	ESSIONAL SERVICES	Non-Facility	Non-Facility	Facility Setting	Non-Facility	Non-Facility	Non-Facility	N/A
99202		Evaluation and Management, including Rx -Straight forward, new patient	\$77.20	\$77.20	\$51.03	\$77.20			\$77.20
99202-UA		C & A Evaluation and Management, including Rx -Straight forward, new patient	\$77.20	\$77.20	\$51.03	\$77.20			\$77.20
99203		Evaluation and Management, including Rx -Low complexity, new patient	\$113.47	\$113.47	\$83.60	\$113.47			\$113.47
99203-UA		C & A Evaluation and Management, including Rx -Low complexity, new patient	\$113.47	\$113.47	\$83.60	\$113.47			\$113.47
99204		Evaluation and Management, including Rx -Moderately complex, new patient	\$169.09	\$169.09	\$136.02	\$169.09			\$169.09
99204-UA		C & A Evaluation and Management, including Rx - Moderately complex, new patient	\$169.09	\$169.09	\$136.02	\$169.09			\$169.09
99205		Evaluation and Management, including Rx -Highly complex, new patient	\$223.14	\$223.14	\$184.74	\$223.14			\$223.14
99205-UA		C & A Evaluation and Management, including Rx -Highly complex, new patient	\$223.14	\$223.14	\$184.74	\$223.14			\$223.14
99211		Evaluation and Management, including Rx -Minimal	\$23.54	\$23.54	\$9.21	\$23.54			\$23.54
99211-UA		C&A Evaluation and Management, including Rx -Minimal	\$23.54	\$23.54	\$9.21	\$23.54			\$23.54
99212		Evaluation and Management, including Rx -Straight forward	\$56.78	\$56.78	\$35.80	\$56.78			\$56.78
99212-UA		C&A Evaluation and Management, including Rx -Straight forward	\$56.78	\$56.78	\$35.80	\$56.78			\$56.78
99213		Evaluation and Management, including Rx -Low complexity	\$92.09	\$92.09	\$67.19	\$92.09			\$92.09
99213-UA		C&A Evaluation and Management, including Rx -Low complexity	\$92.09	\$92.09	\$67.19	\$92.09			\$92.09
99214		Evaluation and Management, including Rx -Moderately complex	\$130.48	\$130.48	\$99.18	\$130.48			\$130.48
99214-UA		C&A Evaluation and Management, including Rx - Moderately complex	\$130.48	\$130.48	\$99.18	\$130.48			\$130.48
99215		Evaluation and Management, including Rx -Highly complex	\$182.02	\$182.02	\$146.11	\$182.02			\$182.02
99215-UA		C&A Evaluation and Management, including Rx -Highly complex	\$182.02	\$182.02	\$146.11	\$182.02			\$182.02
99241		Office Consultation - also used for H&P for PHP (15 Min)	\$46.95	\$46.95	\$32.03	\$46.95			
99242		Office Consultation - also used for H&P for PHP (30 min)	\$88.51	\$88.51	\$67.52	\$88.51			

Effective 07/	/01/2021 throu	gh 12/31/2021							<u> </u>
		Provider types / enrollment requirements:	PT20 must have Specialty 52 or 53	PT20, PT23, PT80	PT20 and PT23, PT80	PT23 with PMH and PT24 each must have category of Service 1A	PT15	PT94 and PTCC	PTMC
Procedure Code	If value of field is 'Y', can bill one E&M Code between 99202 and 9215	Service Description	Psychiatrist	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	омнс
99243		Office Consultation - also used for H&P for PHP (40 min)	\$121.03	\$121.03	\$94.35	\$121.03			
99244		Office Consultation - also used for H&P for PHP (60 min)	\$181.11	\$181.11	\$151.95	\$181.11			
99245		Office Consultation - also used for H&P for PHP (80 min)	\$220.35	\$220.35	\$187.63	\$220.35			
99354		Prolonged phy svc req face-to-face pat contact beyond the usual service							\$130.73
99355		Each additional 30 minutes of a prolonged phy svc							\$99.30
	IOSPITAL SERV		Non-Facility	Non-Facility	Facility Setting	Non-Facility	Non-Facility	Non-Facility	N/A
99221		Initial hospital care (30 min) (MD only)			\$102.73				
99221-UA		C&A Initial hospital care (30 min) (MD only)			\$102.73				
99222		Initial hospital care (50 min) (MD only)			\$138.47				
99222-UA		C&A Initial hospital care (50 min) (MD only)			\$138.47				
99223		Initial hospital care (70 min) (MD only)			\$203.07				
99223-UA		C&A Initial hospital care (70 min) (MD only)			\$203.07				
99231		Subsequent IP care (15 min) (MD only)			\$39.46				
99231-UA		C&A Subsequent IP care (15 min) (MD only)			\$39.46				
99232		Subsequent IP care (25 min) (MD only)			\$72.84				
99232-UA		C&A Subsequent IP care (25 min) (MD only)			\$72.84				
99233		Subsequent IP care (35 min) (MD only)			\$104.33				
99233-UA		C&A Subsequent IP care (35 min) (MD only)			\$104.33				
99238		Hospital discharge day mgmt (30 min or less) (MD only)			\$73.40				
99238-UA		C&A Hospital discharge day mgmt (30 min or less) (MD only)			\$73.40				
99239		Hospital discharge day mgmt (>30 min) (MD only)			\$108.04				
99239-UA		C&A Hospital discharge day mgmt (>30 min) (MD only)			\$108.04				
99251		Initial inpatient consultation (20 min) (MD only) - also used for H&P for Inpatient Non Psych Physician		\$48.57	\$48.57				
99252		Initial inpatient consultation (40 min) (MD only) - also used for H&P for Inpatient Non Psych Physician		\$74.07	\$74.07				
99253		Initial inpatient consultation (55 min) (MD only) - also used for H&P for Inpatient Non Psych Physician		\$113.70	\$113.70				
99254		Initial inpatient consultation (80 min) (MD only) - also used for H&P for Inpatient Non Psych Physician		\$164.58	\$164.58				
99255		Initial inpatient consultation (110 min) (MD only) - also used for H&P for Inpatient Non Psych Physician		\$198.29	\$198.29				

Public Menta	al Health Syste	m Rates- Evaluation and Management Only							
		gh 12/31/2021							
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Procedure Code	If value of field is 'Y', can bill one E&M Code between 99202 and 9215	Service Description	Psychiatrist	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	ОМНС
99281		ER Visit			\$22.76				
99282		ER Visit			\$43.68				
99283		ER Visit			\$71.93				
99284		ER Visit			\$122.12				
99285		ER Visit			\$178.43				
TRANSCRAN	IAL MAGNETIC	STIMULATION (TMS)	Non-Facility	Non-Facility	Facility Setting	Non-Facility	Non-Facility	Non-Facility	N/A
99202-25	Y	Evaluation and Management, including Rx -Straight forward, new patient	\$77.20						
99203-25	Y	Evaluation and Management, including Rx -Low complexity, new patient	\$113.47						
99204-25	Y	Evaluation and Management, including Rx -Moderately complex, new patient	\$169.09						
99205-25	Y	Evaluation and Management, including Rx -Highly complex, new patient	\$223.14						
99211-25	Y	Evaluation and Management, including Rx -Minimal	\$23.54						
99212-25	Y	Evaluation and Management, including Rx -Straight forward	\$56.78						
99213-25	Y	Evaluation and Management, including Rx -Low complexity	\$92.09						
99214-25	Y	Evaluation and Management, including Rx -Moderately complex	\$130.48						
99215-25	Y	Evaluation and Management, including Rx -Highly complex	\$182.02						
		VICES FOR Mental Health IOP, Mental Health PHP and	Non-Facility	Non-Facility	Facility Setting	Non-Facility	Non-Facility	Non-Facility	OMHC *
	ntial Services								
99202		Evaluation and Management, including Rx -Straight forward, new patient	\$77.20	\$77.20	\$51.03	\$77.20			\$77.20
99203		Evaluation and Management, including Rx -Low complexity, new patient	\$113.47	\$113.47	\$83.60	\$113.47			\$113.47
99204		Evaluation and Management, including Rx -Moderately complex, new patient	\$169.09	\$169.09	\$136.02	\$169.09			\$169.09
99205		Evaluation and Management, including Rx -Highly complex, new patient	\$223.14	\$223.14	\$184.74	\$223.14			\$223.14
99211		Evaluation and Management, including Rx -Minimal	\$23.54	\$23.54	\$9.21	\$23.54			\$23.54

		m Rates- Evaluation and Management Only gh 12/31/2021							
		Provider types / enrollment requirements:	PT20 must have Specialty 52 or 53	PT20, PT23, PT80	PT20 and PT23, PT80	PT23 with PMH and PT24 each must have category of Service 1A	PT15	PT94 and PTCC	PTMC
Procedure Code	If value of field is 'Y', can bill one E&M Code between 99202 and 9215	Service Description	Psychiatrist	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	Physician Non- Psychiatrist; Nurse Practitioner, Non- Psychiatric, and Physician's Assistant	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	ОМНС
99212		Evaluation and Management, including Rx -Straight forward	\$56.78	\$56.78	\$35.80	\$56.78			\$56.78
99213		Evaluation and Management, including Rx -Low complexity	\$92.09	\$92.09	\$67.19	\$92.09			\$92.09
99214		Evaluation and Management, including Rx -Moderately complex	\$130.48	\$130.48	\$99.18	\$130.48			\$130.48
99215		Evaluation and Management, including Rx -Highly complex	\$182.02	\$182.02	\$146.11	\$182.02			\$182.02
* Reimbursa	ble using POS	12 for follow-up visits by an OMHC M.D. in a Crisis Bed							