

Effective 01/01/2024

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	Provider types/ enrollment requirements:		PT20 must have Specialty 52 or 53	PT20 and PT23, PT80	PT23 with PMH and PT24 each must have category of Service 1A	PT15	PT94 and PTCC	PTMC
Procedure Code	Service Description	Units	Psychiatrist	Psychiatrist, NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	OMHC
OUTPATIENT/OFFICE PROFESSIONAL SERVICES			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
99202	Evaluation and Management, including Rx -Straight forward, new patient		\$79.65	\$52.72	\$79.65			\$79.65
99202-UA	C&A Evaluation and Management, including Rx -Straight forward, new patient		\$79.65	\$52.72	\$79.65			\$79.65
99203	Evaluation and Management, including Rx -Low complexity, new patient		\$122.30	\$90.06	\$122.30			\$122.30
99203-UA	C&A Evaluation and Management, including Rx -Low complexity, new patient		\$122.30	\$90.06	\$122.30			\$122.30
99204	Evaluation and Management, including Rx -Moderately complex, new patient		\$181.53	\$145.50	\$181.53			\$181.53
99204-UA	C&A Evaluation and Management, including Rx -Moderately complex, new patient		\$181.53	\$145.50	\$181.53			\$181.53
99205	Evaluation and Management, including Rx -Highly complex, new patient		\$239.94	\$197.46	\$239.94			\$239.94
99205-UA	C&A Evaluation and Management, including Rx -Highly complex, new patient		\$239.94	\$197.46	\$239.94			\$239.94
99211	Evaluation and Management, including Rx -Minimal		\$25.44	\$9.51	\$25.44			\$25.44
99211-UA	C&A Evaluation and Management, including Rx -Minimal		\$25.44	\$9.51	\$25.44			\$25.44
99212	Evaluation and Management, including Rx -Straight forward		\$61.84	\$39.08	\$61.84			\$61.84
99212-UA	C&A Evaluation and Management, including Rx -Straight forward		\$61.84	\$39.08	\$61.84			\$61.84
99213	Evaluation and Management, including Rx -Low complexity		\$98.58	\$71.65	\$98.58			\$98.58
99213-UA	C&A Evaluation and Management, including Rx -Low complexity		\$98.58	\$71.65	\$98.58			\$98.58
99214	Evaluation and Management, including Rx -Moderately complex		\$138.61	\$104.86	\$138.61			\$138.61
99214-UA	C&A Evaluation and Management, including Rx -Moderately complex		\$138.61	\$104.86	\$138.61			\$138.61
99215	Evaluation and Management, including Rx -Highly complex		\$195.63	\$156.18	\$195.63			\$195.63
99215-UA	C&A Evaluation and Management, including Rx -Highly complex		\$195.63	\$156.18	\$195.63			\$195.63
90875	Indiv psychophysio therapy incl biofdbk (20-30 min)		\$75.50		\$53.82	\$61.68	\$53.82	\$77.01
90876	Indiv psychophysio therapy incl biofdbk (45-50 min)		\$137.19		\$98.13	\$111.77	\$98.13	\$139.94
90889	Outpatient Discharge (CMS 1500)							\$31.44
0929	Outpatient Discharge (UB)							\$31.44
96130	Psychological Testing Evaluation services by a Physician or other qualified professional. Treatment planning and Report and Interactive feed back to the patient, family members and caregiver's (first hour)					\$174.15		\$174.15
96131	Psychological Testing, Evaluation and Feedback by Physician or other qualified professional (each additional hour)					\$132.34		\$132.34
96136	Psychological Test administration and scoring by a Physician or other qualified professional (first 30 minutes)					\$71.81		\$71.81
96137	Test administration and scoring by a Physician or other qualified professionals (each additional 30 minutes)					\$66.95		\$66.95
96138	Psychological test administration and scoring by a Technician (first 30 minutes)					\$59.80		\$59.80
96139	Psychological test administration and scoring by a Technician (each additional 30 minutes)					\$59.80		\$59.80

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OUTPATIENT/OFFICE PROFESSIONAL SERVICES			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
99242	Office Consultation - also used for H&P for PHP (20 min)		\$94.39	\$72.01	\$94.39			
99243	Office Consultation - also used for H&P for PHP (30 min)		\$129.98	\$101.53	\$129.98			
99244	Office Consultation - also used for H&P for PHP (40 min)		\$193.14	\$162.03	\$193.14			
99245	Office Consultation - also used for H&P for PHP (55 min)		\$235.44	\$200.55	\$235.44			
99417	Prolonged outpatient evaluation and management service, with or without direct patient contact; each 15 minutes of total time	Each 15 minutes	\$34.21	\$33.08	\$34.21			\$34.21
INPATIENT HOSPITAL SERVICES			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
99221	Initial hospital care (30 min) (MD only)			\$107.43				
99221-UA	C&A Initial hospital care (30 min) (MD only)			\$107.43				
99222	Initial hospital care (50 min) (MD only)			\$143.81				
99222-UA	C&A Initial hospital care (50 min) (MD only)			\$143.81				
99223	Initial hospital care (70 min) (MD only)			\$210.42				
99223-UA	C&A Initial hospital care (70 min) (MD only)			\$210.42				
99231	Subsequent IP or observation care (25 min) (MD only)			\$41.22				
99231-UA	C&A Subsequent IP or observation care (25 min) (MD only)			\$41.22				
99232	Subsequent IP or observation care (35 min) (MD only)			\$75.61				
99232-UA	C&A Subsequent IP or observation care (35 min) (MD only)			\$75.61				
99233	Subsequent IP or observation care (50 min) (MD only)			\$108.61				
99233-UA	C&A Subsequent IP or observation care (50 min) (MD only)			\$108.61				
99238	Hospital IP or observation discharge day mgmt (30 min or less) (MD only)			\$76.55				
99238-UA	C&A Hospital IP or observation discharge day mgmt (30 min or less) (MD only)			\$76.55				
99239	Hospital IP or observation discharge day mgmt (>30 min) (MD only)			\$111.73				
99239-UA	C&A Hospital IP or observation discharge day mgmt (>30 min) (MD only)			\$111.73				
99252	Initial inpatient or observation consultation (35 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$78.08				
99253	Initial inpatient or observation consultation (45 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$121.70				
99254	Initial inpatient or observation consultation (60 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$175.05				
99255	Initial inpatient or observation consultation (80 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$211.91				
99418	Prolonged inpatient evaluation and management service with or without direct patient contact; each 15 minutes of total time	Each 15 minutes		\$41.30				

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OBSERVATION CARE (POS 22)			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
99231	Subsequent IP or observation care (25 min) (MD only)			\$41.22				
99231-UA	C&A Subsequent IP or observation care (25 min) (MD only)			\$41.22				
99232	Subsequent IP or observation care (35 min) (MD only)			\$75.61				
99232-UA	C&A Subsequent IP or observation care (35 min) (MD only)			\$75.61				
99233	Subsequent IP or observation care (50 min) (MD only)			\$108.61				
99233-UA	C&A Subsequent IP or observation care (50 min) (MD only)			\$108.61				
99238	Hospital IP or observation discharge day mgmt (30 min or less) (MD only)			\$76.55				
99238-UA	C&A Hospital IP or observation discharge day mgmt (30 min or less) (MD only)			\$76.55				
99239	Hospital IP or observation discharge day mgmt (>30 min) (MD only)			\$111.73				
99239-UA	C&A Hospital IP or observation discharge day mgmt (>30 min) (MD only)			\$111.73				
99252	Initial inpatient or observation consultation (35 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$78.08				
99253	Initial inpatient or observation consultation (45 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$121.70				
99254	Initial inpatient or observation consultation (60 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$175.05				
99255	Initial inpatient or observation consultation (80 min) (MD only) - also used for H&P for Inpatient Non Psych Physician			\$211.91				
EMERGENCY ROOM SERVICES (POS 23)			Facility Setting	Facility Setting	Facility Setting	Facility Setting	Facility Setting	N/A
Procedure Code	Service Description		Psychiatrist	ER Physician Groups, rendering providers may be Psychiatrist, ER Physician, Nurse Practitioner without PMH	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT rendering under a Physician ER Group	OMHC
90791	Psychiatric diagnostic evaluation		\$228.80		\$163.13	\$186.30	\$163.13	
90791-UA	C&A Psychiatric diagnostic evaluation		\$228.80		\$163.13	\$186.30	\$163.13	
90792	Psychiatric diagnostic evaluation with medical services		\$228.80		\$163.13			
90792-UA	C&A Psychiatric diagnostic evaluation with medical services		\$228.80		\$163.13			
99281	ER Visit			\$23.52	\$23.52			
99282	ER Visit			\$45.59	\$45.59			
99283	ER Visit			\$77.62	\$77.62			
99284	ER Visit			\$130.68	\$130.68			
99285	ER Visit			\$189.83	\$189.83			
MISCELLANEOUS			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
Procedure Code	Service Description		Psychiatrist	Psychiatrist, NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	NP, CRNP, APRN must have Psychiatric Mental Health Certification (PMH)	Licensed Psychologist (PHD or PsyD)	LCSW-C, LCPC, LCADC, LCMFT	OMHC
00104	Anesthesia for ECT		\$145.35					
90870	ECT single seizure w/ monitoring (Physician only)		\$145.51					
36415	Collection of blood by venipuncture							\$21.38
96372	Therapeutic injection		\$15.35		\$15.35			\$21.39

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SPECIAL SERVICES			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
S9480	Intensive OP psych svcs, per diem (clinic model)							\$199.56
S9480-UA	C&A Intensive OP psych svcs, per diem (clinic model)							\$237.24
H0032	Interdisciplinary team tx planning w/patient present							\$127.52
H0046	Therapeutic Nursery							\$64.94
GAMDC	Gambling Discharge, effective 1/1/2022: The State will pay for gambling discharge only if the gambling treatment was state funded. In order to be reimbursed, at least one treatment session beyond assessment must have occurred, and the provider must have submitted the gambling data form.		\$114.49		\$114.49	\$114.49	\$114.49	\$114.49
OCCUPATIONAL THERAPY (MA COVERS UNDER 21 ONLY, STATE REQUIRES AUTH)			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
97150	Therapeutic procedure(s) group (2 or more)						\$26.16	
97530	Therapeutic activities, direct patient contact, per 15 min	Each 15 minutes					\$16.93	
97535	Self-care/home mgmt trng, per 15 min.	Each 15 minutes					\$16.93	
97537	Community/work reintegration trng, direct contact, per 15 min	Each 15 minutes					\$16.93	
THERAPEUTIC BEHAVIORAL SERVICES			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
96156	Health Behavior Assessment or Re-Assessment Non Timed		\$162.40					
96158	Health Behavior Intervention, Individual, Face to Face, Initial 30 Minutes		\$35.20					
96159	Health Behavior Intervention, Individual, Face to Face, Each additional 15 minutes	Each additional 15 minutes, Max 40	\$17.59					
TRANSCRANIAL MAGNETIC STIMULATION (TMS)			Community Setting	Facility Setting POS 22	Community Setting	Community Setting	Community Setting	Community Setting
90867	Therapeutic repetitive TMS Treatment, Initial		\$223.48	\$223.48				
90868	Therapeutic repetitive TMS Treatment, Subsequent Delivery and Management (per session)		\$204.97	\$204.97				
90869	Therapeutic repetitive TMS Treatment, Subsequent Re Determination with Delivery and Management		\$559.81	\$559.81				
99202-25	Evaluation and Management, including Rx -Straight forward, new patient		\$79.65	\$79.65				
99203-25	Evaluation and Management, including Rx -Low complexity, new patient		\$122.30	\$122.30				
99204-25	Evaluation and Management, including Rx -Moderately complex, new patient		\$181.53	\$181.53				
99205-25	Evaluation and Management, including Rx -Highly complex, new patient		\$239.94	\$239.94				
99211-25	Evaluation and Management, including Rx -Minimal		\$25.44	\$25.44				
99212-25	Evaluation and Management, including Rx -Straight forward		\$61.84	\$61.84				
99213-25	Evaluation and Management, including Rx -Low complexity		\$98.58	\$98.58				
99214-25	Evaluation and Management, including Rx -Moderately complex		\$138.61	\$138.61				
99215-25	Evaluation and Management, including Rx -Highly complex		\$195.63	\$195.63				

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OTHER PROFESSIONAL SERVICES FOR Mental Health IOP, Mental Health PHP and Crisis Residential Services			Community Setting	Facility Setting	Community Setting	Community Setting	Community Setting	Community Setting
90791	Psychiatric diagnostic evaluation		\$228.80		\$163.13	\$186.30	\$163.13	\$262.07
90791-UA	C&A Psychiatric diagnostic evaluation		\$228.80		\$163.13	\$186.30	\$163.13	\$292.70
90792	Psychiatric diagnostic evaluation with medical services		\$228.80		\$163.13			\$262.07
90792-UA	C&A Psychiatric diagnostic evaluation with medical services		\$228.80		\$163.13			\$292.70
99202	Evaluation and Management, including Rx -Straight forward, new patient		\$79.65	\$52.72	\$79.65			\$79.65
99203	Evaluation and Management, including Rx -Low complexity, new patient		\$122.30	\$90.06	\$122.30			\$122.30
99204	Evaluation and Management, including Rx -Moderately complex, new patient		\$181.53	\$145.50	\$181.53			\$181.53
99205	Evaluation and Management, including Rx -Highly complex, new patient		\$239.94	\$197.46	\$239.94			\$239.94
99211	Evaluation and Management, including Rx -Minimal		\$25.44	\$9.51	\$25.44			\$25.44
99212	Evaluation and Management, including Rx -Straight forward		\$61.84	\$39.08	\$61.84			\$61.84
99213	Evaluation and Management, including Rx -Low complexity		\$98.58	\$71.65	\$98.58			\$98.58
99214	Evaluation and Management, including Rx -Moderately complex		\$138.61	\$104.86	\$138.61			\$138.61
99215	Evaluation and Management, including Rx -Highly complex		\$195.63	\$156.18	\$195.63			\$195.63
90832	Individual psychotherapy (30 min) MD Only		\$66.04		\$66.04			\$67.36
90834	Individual psychotherapy (45 min) MD Only		\$124.17		\$124.17			\$126.65
* Reimbursable using POS 12 for follow-up visits by an OMHC M.D. in a Crisis Bed								