Certified Nurse Practitioner Fee Schedule

Provider Specialty 112

Code	Mod	Description	Unit	Non-Facility Fee	Facility Fee	Effective Date
90801		Per Clinical Intake	per event	$107.57	$ 90.89	9/1/2010
90802		Interactive Evalucation	per event	$114.68	$ 97.75	9/1/2010
90804		Individual Therapy (20-30 min)	per time limit	$ 47.19	$ 40.34	9/1/2010
90805		Individual Therapy (20-30 min) MD	per time limit	$ 56.60	$ 54.56	9/1/2010
90806		Individual Therapy (45-50 min)	per time limit	$ 66.23	$ 61.91	9/1/2010
90807		Individual Therapy (45-50 min) MD	per time limit	$ 79.89	$ 78.11	9/1/2010
90808		Individual Therapy (75-80 min)	per time limit	$ 97.44	$ 93.13	9/1/2010
90810		Interactive Therapy (20-30 min	per time limit	$ 50.13	$ 44.04	9/1/2010
90811		Interactive Therapy (30 min) MD	per time limit	$ 58.34	$ 49.45	9/1/2010
90812		Interactive Therapy (45-50 min)	per time limit	$ 72.04	$ 65.70	9/1/2010
90813		Interactive Therapy (50 min) MD	per time limit	$ 79.92	$ 71.03	9/1/2010
90814		Interactive Therapy (75-80 min)	per time limit	$104.53	$ 98.43	9/1/2010
90815		Interactive Therapy - 80 min w/eval & mgmt svcs	per time limit	$110.86	$101.98	9/1/2010
90816		Individual Therapy (20-30 min)	per time limit	$ 43.98	$ 43.98	9/1/2010
90818		Individual Therapy (45-50 min)	per time limit	$ 65.52	$ 65.52	9/1/2010
90821		Individual Therapy (75-80 min)	per time limit	$ 92.16	$ 92.16	9/1/2010
90823		Interactive Therapy (20-30 min)	per time limit	$ 47.50	$ 47.50	9/1/2010
90826		Interactive Therapy (45-50 min)	per time limit	$ 69.52	$ 69.52	9/1/2010
90828		Interactive Therapy (75-80 min)	per time limit	$100.54	$100.54	9/1/2010
90846		Family Therapy w/o patient	per event	$ 61.81	$ 60.35	9/1/2010
90847		Family Therapy w/patient	per event	$ 76.75	$ 72.39	9/1/2010
90849		Group therapy (multi-family)	per event	$ 23.02	$ 21.07	9/1/2010
90853		Group therapy (other than of a multi-family group)	per event	$ 21.88	$ 20.67	9/1/2010
90857		Interactive Group Psychotherapy	per event	$ 24.62	$ 21.96	9/1/2010
90862		Medication Check-Individual	per event	$ 42.34	$ 40.31	9/1/2010
H0001		Behavioral Health Assessment	15 minutes	$ 19.94	$ 19.94	9/1/2010
H0004		Behavioral Health Counseling and Therapy	15 minutes	$ 19.94	$ 19.94	9/1/2010
H0004	HQ	DMH Outpatient Treatment Group	15 minutes	$ 7.35	$ 7.35	9/1/2010
H0004	HR	DMH Outpatient Tx Family Therapy w/Client	15 minutes	$ 19.94	$ 19.94	9/1/2010
H0004	HS	DMH Outpatient Tx Family Therapy w/o Client	15 minutes	$ 19.94	$ 19.94	9/1/2010
H0005		Alcohol and/or Drug Services; Group Counseling by Clinician	15 minutes	$ 7.35	$ 7.35	9/1/2010
H0031		Mental Health Assessment	15 minutes	$ 19.94	$ 19.94	9/1/2010