## Provisionally Licensed Clinicians Billing Incident To a Physician
Billing Through Specialty 113 (LME)

The inclusion of a rate on this table does not guarantee that a service is covered. Please refer to the Medicaid Billing Guide and the Medicaid and Health Choice Clinical Coverage Policies on the DMA Web site.

<table>
<thead>
<tr>
<th>Service Code with Modifiers</th>
<th>Service Description</th>
<th>Billing Unit</th>
<th>Rate for Service</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>H0001</td>
<td>Alcohol and/or Drug Assessment</td>
<td>15 minutes</td>
<td>$13.87</td>
<td>7/1/2012</td>
</tr>
<tr>
<td>H0004</td>
<td>Behavioral Health Counseling and Therapy</td>
<td>15 minutes</td>
<td>$19.81</td>
<td>7/1/2012</td>
</tr>
<tr>
<td>H0004 HQ</td>
<td>DMH Outpatient Treatment Group</td>
<td>15 minutes</td>
<td>$7.30</td>
<td>7/1/2012</td>
</tr>
<tr>
<td>H0004 HR</td>
<td>DMH Outpatient Tx Family Therapy w/ Client</td>
<td>15 minutes</td>
<td>$19.81</td>
<td>7/1/2012</td>
</tr>
<tr>
<td>H0004 HS</td>
<td>DMH Outpatient Tx Family Therapy w/o Client</td>
<td>15 minutes</td>
<td>$19.81</td>
<td>7/1/2012</td>
</tr>
<tr>
<td>H0005</td>
<td>Alcohol and/or Drug Services; Group Counseling by Clinician</td>
<td>15 minutes</td>
<td>$5.12</td>
<td>7/1/2012</td>
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<tr>
<td>H0031</td>
<td>Mental Health Assessment</td>
<td>15 minutes</td>
<td>$13.87</td>
<td>7/1/2012</td>
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