

**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	\$ 109.05	\$ 92.13	10/1/2009
90802		Interactive Evaluation	per event	\$ 116.25	\$ 99.09	10/1/2009
90804		Individual Therapy (20-30 min)	per time limit	\$ 47.84	\$ 40.89	10/1/2009
90805		Individual Therapy (20-30 min) MD	per time limit	\$ 57.37	\$ 55.31	10/1/2009
90806		Individual Therapy (45-50 min)	per time limit	\$ 67.13	\$ 62.76	10/1/2009
90807		Individual Therapy (45-50 min) MD	per time limit	\$ 80.98	\$ 79.18	10/1/2009
90808		Individual Therapy (75-80 min)	per time limit	\$ 98.78	\$ 94.40	10/1/2009
90810		Interactive Therapy (20-30 min)	per time limit	\$ 50.82	\$ 44.64	10/1/2009
90811		Interactive Therapy (30 min) MD	per time limit	\$ 59.14	\$ 50.13	10/1/2009
90812		Interactive Therapy (45-50 min)	per time limit	\$ 73.02	\$ 66.60	10/1/2009
90813		Interactive Therapy (50 min) MD	per time limit	\$ 81.01	\$ 72.00	10/1/2009
90814		Interactive Therapy (75-80 min)	per time limit	\$ 105.96	\$ 99.78	10/1/2009
90815		Interactive Therapy - 80 min w/eval & mgmt svcs	per time limit	\$ 112.38	\$ 103.38	10/1/2009
90816		Individual Therapy (20-30 min)	per time limit	\$ 44.58	\$ 44.58	10/1/2009
90818		Individual Therapy (45-50 min)	per time limit	\$ 66.42	\$ 66.42	10/1/2009
90821		Individual Therapy (75-80 min)	per time limit	\$ 93.42	\$ 93.42	10/1/2009
90823		Interactive Therapy (20-30 min)	per time limit	\$ 48.15	\$ 48.15	10/1/2009
90826		Interactive Therapy (45-50 min)	per time limit	\$ 70.47	\$ 70.47	10/1/2009
90828		Interactive Therapy (75-80 min)	per time limit	\$ 101.92	\$ 101.92	10/1/2009
90846		Family Therapy w/o patient	per event	\$ 62.65	\$ 61.18	10/1/2009
90847		Family Therapy w/patient	per event	\$ 77.80	\$ 73.38	10/1/2009
90849		Group therapy (multi-family)	per event	\$ 23.33	\$ 21.36	10/1/2009
90853		Group therapy (other than of a multi-family group)	per event	\$ 22.18	\$ 20.95	10/1/2009
90857		Interactive Group Psychotherapy	per event	\$ 24.96	\$ 22.26	10/1/2009
90862		Medication Check-Individual	per event	\$ 42.92	\$ 40.86	10/1/2009
96372		Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	per event	\$ 14.48	\$ 14.48	10/1/2009
H0001		Alcohol and/or Drug Assessment	15 minutes	\$ 20.21	\$ 20.21	10/1/2009
H0004		Behavioral Health Counseling and Therapy	15 minutes	\$ 20.21	\$ 20.21	10/1/2009
H0004	HQ	DMH Outpatient Treatment Group	15 minutes	\$ 7.45	\$ 7.45	10/1/2009
H0004	HR	DMH Outpatient Tx Family Therapy w/Client	15 minutes	\$ 20.21	\$ 20.21	10/1/2009
H0004	HS	DMH Outpatient Tx Family Therapy w/o Client	15 minutes	\$ 20.21	\$ 20.21	10/1/2009
H0005		Alcohol and/or Drug Services; Group Counseling by Clinician	15 minutes	\$ 7.45	\$ 7.45	10/1/2009
H0031		Mental Health Assessment	15 minutes	\$ 20.21	\$ 20.21	10/1/2009
J1630		Haloperidol, up to 5 mg, injection (Haldol)		\$ 1.67	\$ 1.67	10/1/2009
J1631		Haloperidol decanoate, per 50 mg, injection (Haldol Decanoate-50)		\$ 2.32	\$ 2.32	10/1/2009
J2315		Naltrexone, depot form, 1 mg, injection		\$ 1.81	\$ 1.81	10/1/2009
J2680		Fluphenazine decanoate, up to 25 mg, injection (Prolixin)		\$ 2.28	\$ 2.28	10/1/2009
J3230		Chlorpromazine HCl, up to 50 mg, injection (Thorazine)		\$ 3.10	\$ 3.10	10/1/2009