CODE	DESCRIPTION	MODIFIERS	STATUS	FEE	LIMITS
90804	INDIVD PSYCHOTHERAPY		A	$ 80.25	2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)
90806	**INDIVID PSYCH**		**A**	**$ 160.50**	**2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)**
90810	INDIVID PSYCHO INTERAC 20-30MI		A	$ 80.25	2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)
90812	IND PSYCH INTERACTIVE		A	$ 160.51	2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)
90846	FAMILY PSYCHOTHERAPY W/O PT		A	$ 72.76	4 PER MONTH PER PER DISCIPLINE (UP TO 3 DISCIPLINES)
90847	FAMILY MEDICAL PSYCHOTHERAPY		A	$ 72.76	4 PER MONTH PER PER DISCIPLINE (UP TO 3 DISCIPLINES)
90853	GROUP MEDICAL PSYCHOTHERAPY		A	$ 22.58	4 PER MONTH PER PER DISCIPLINE (UP TO 3 DISCIPLINES)
92506	SPEECH/HEARING EVALUATION		A	$ 118.15	6 PER YEAR PER
92506	SPEECH/HEARING EVALUATION	HT	A	$ 246.85	4 PER YEAR PER DISCIPLINE (UP TO 2 DISCIPLINES)
92506	SPEECH/HEARING EVALUATION	TM	A	$ 88.61	6 PER YEAR PER DISCIPLINE (UP TO 2 DISCIPLINES)
92507	SPEECH THERAPY INDIV TREATMENT		A	$ 92.09	1 PER DAY
92508	SPEECH THERAPY GRP TREATMENT		A	$ 46.06	1 PER DAY
96100	PSYCH TEST INTER/REP PER HOUR		A	$ 117.96	5 HOURS PER YEAR PER DISCIPLINE (UP TO 2 DISCIPLINES)
96100	PSYCH TEST INTER/REP PER HOUR	HT	A	$ 316.65	
96110	DEV TESTING LIMITED W INT/REP		A	$ 72.76	12 PER YEAR
96110	DEV TESTING LIMITED W INT/REP	HT	A	$ 72.76	4 PER YEAR
96111	DEV TESTING EXT INT/REP HOUR		A	$ 72.76	2 HOURS PER MONTH
96111	DEV TESTING EXT INT/REP HOUR	HT	A	$ 117.96	4 HOURS PER YEAR
96115	NEUROBEH STATUS EXAM PER HR		A	$ 117.96	5 HOURS PER YEAR PER DISCIPLINE (UP TO 2 DISCIPLINES)
96115	NEUROBEH STATUS EXAM PER HR	HT	A	$ 316.65	
96117	NEUROBEH ST EXAM PER HOUR		A	$ 117.96	5 HOURS PER YEAR PER DISCIPLINE (UP TO 2 DISCIPLINES)
96117	NEUROBEH ST EXAM PER HOUR	HT	A	$ 316.65	
97001	PHYSICAL THERAPY EVAL		A	$ 119.69	6 PER YEAR
97001	PHYSICAL THERAPY EVAL	HT	A	$ 190.06	4 PER YEAR
97001	PHYSICAL THERAPY EVAL	TM	A	$ 63.36	6 PER YEAR
97003	OCCUPATIONAL THER EVAL		A	$ 126.69	6 PER YEAR
97003	OCCUPATIONAL THER EVAL	HT	A	$ 190.06	4 PER YEAR
97003	OCCUPATIONAL THER EVAL	TM	A	$ 63.36	6 PER YEAR
97110	PHYSICAL MEDICINE TREATMENT		A	$ 32.34	4 UNITS PER DAY PER DISCIPLINE (UP TO 2 DISCIPLINES)
97112	NERUO RE EC		A	$ 65.72	1 PER DAY
97150	GROUP THERAPY		A	$ 32.95	1 PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)

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CODE	DESCRIPTION	MODIFIERS	STATUS	FEE	LIMITS
97504	ORTHO FITT/TRAIN 15 MIN EA		A	$ 32.86	4 UNITS PER DAY
97520	PROSTHETIC TRAINING;		A	$ 32.86	4 UNITS PER DAY
97533	SENS INTEG TECH 1ON1 PT CONT		A	$ 31.34	4 PER DAY
97535	SELF CARE 15 MIN EA		A	$ 41.64	4 UNITS PER DAY
99361	MED CONF PHYS W INTER DIS TEAM		A	$ 125.68	2 UNITS PER DAY
99361	MED CONF PHYS W INTER DIS TEAM	HT	A	$ 125.68	4 PER YEAR
99361	MED CONF PHYS W INTER DIS TEAM	TM	A	$ 125.68	6 PER YEAR
A0120	NON EMER TRANS MINBUS MNTN ARE		A	$ 25.77	1 ROUND TRIP PER DAY
A0130	NON EMER TRANS WHEELCH VAN		A	$ 45.37	1 ROUND TRIP PER DAY
H0004	BEHAVIORIAL HEALTH COUNSEL		A	$ 40.13	2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)
H0031	MENTAL HEALTH ASSESS BY NONPHY		A	$ 226.13	2 UNITS PER DAY PER DISCIPLINE (UP TO 3 DISCIPLINES)
H0031	MENTAL HEALTH ASSESS BY NONPHY	HT	A	$ 316.65	4 PER YEAR PER DISCIPLINE (UP TO 3 DISCIPLINES)
H0031	MENTAL HEALTH ASSESS BY NONPHY	TM	A	$72.76	6 PER YEAR PER DISCIPLINE (UP TO 3 DISCIPLINES)
S9484	CRISIS INTER MEN HEA PER HOUR		A	$ 226.13	36 HOURS PER YEAR PER DISCIPLINE (UP TO 12 DISCIPLINES)
T1001	NURSING ASSES EVAL		A	$ 97.64	6 PER YEAR
T1001	NURSING ASSES EVAL	HT	A	$ 253.41	4 PER YEAR
T1001	NURSING ASSES EVAL	TM	A	$ 95.01	6 PER YEAR
T1002	RN SERVICES UP TO 15 MIN		A	$ 31.67	4 UNITS PER DAY
T1017	TARGETED CASE MANAGE 15 MIN EA		A	$ 37.85	2 UNITS PER DAY PER DISCIPLINE (UP TO 12 DISCIPLINES)
T1024	EVAL SPEC TEAM PER ENCOUNTER	HT	A	$ 92.16	4 PER YEAR PER DISCIPLINE (UP TO 3 DISCIPLINES)
T1024	EVAL SPEC TEAM PER ENCOUNTER	TM	A	$ 64.98	6 PER YEAR PER DISCIPLINE (UP TO 3 DISCIPLINES)
T2023	TARGETED CASE MANAGE PER MONTH		A	$ 489.26	12 PER YEAR
Z5713	SPEECH/LANG/HEAR INTERMEDIATE		D	$83.99	
Z5714	SPEECH/LANG/HEAR INTERMEDIATE		D	$111.99	
Z5715	SPEECH/LANG/HEAR COMPLEX		D	$223.98	
Z5716	SPEECH/LANG/HEAR GROUP		D	$43.66	
Z5717	OT-INTERMEDIATE		D	$60.06	
Z5718	OT-COMPREHENSIVE		D	$120.09	
Z5719	OT-COMPLEX		D	$180.15	
Z5720	OT-GROUP		D	$31.23	
Z5721	PT-INTERMEDIATE		D	$60.06	
Z5722	PT-COMPREHENSIVE		D	$113.45	
Z5723	PT-COMPLEX		D	$180.15	
Z5724	PT-GROUP		D	$31.23	
Z5725	PSYCOLOGICAL,COUNSELING-INTER		D	$68.97	
Z5726	PSYCOLOGICAL,COUNSELING-COMP		D	$111.81	
Z5727	PSYCH/COUNSEL/SOCWORK-COMPLEX		D	$300.14	
Z5728	PSYCHOLOGICAL,COUNSELING-GROUP		D	$21.40	
Z5729	DEVELOPMENTAL TEST-INTERMED		D	$68.97	
Z5730	DEVELOPMENTAL TEST-COMPREHEN		D	$ 111.81	

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CODE	DESCRIPTION	MODIFIERS	STATUS	FEE	LIMITS
Z5731	IDEA ASSESSMENT-INTERMEDIATE		D	$68.97	
Z5732	IDEA ASSESSMENT-COMPREHENSIVE		D	$111.81	
Z5733	IDEA ASSESSMENT-COMPLEX		D	$300.14	
Z5734	NURSING LIMITED		D	$30.02	
Z5735	NURSING-INTERMEDIATE		D	$90.06	
Z5736	NURSING-COMPREHENSIVE		D	$120.09	
Z5737	NURSING-COMPLEX		D	$240.20	
Z5738	TRANSPORTATION-OWNED/LEASED		D	$47.26	
Z5739	TRANS-OWNED/LEASED W/ATTENDANT		D	$47.26	
Z5740	TRANSPORTATION -CONTRACTED		D	$47.26	
Z5741	TRANS-CONTRACTED W/ATTENDANT		D	$47.26	
Z5742	TRANSPORTATION-NO SPEC ACCOM		D	$26.84	
Z5745	SOCIAL WORK,COUNSELING -INTERM		D	$68.97	
Z5746	SOCIAL WORK,COUNSELING-COMPREH		D	$111.81	
Z5747	SOCIAL WORK,COUNSELING-GROUP		D	$21.40	
Z5748	ATD,PT,INTERMED		D	$60.05	
Z5749	ATD,PT,COMP		D	$113.45	
Z5750	ATD,PT,COMPLEX		D	$180.14	
Z5751	ATD,OT, INTERMED		D	$60.05	
Z5752	ATD,OT,COMP		D	$120.10	
Z5753	ATD,OT, COMPLEX		D	$180.14	
Z5754	ATD,SLH,INTERMED		D	$83.99	
Z5755	ATD,SLH,COMPRE		D	$111.99	
Z5756	ATD,SLH,COMPLEX		D	$223.98	
Z5757	O + M, INTERMED		D	$58.28	
Z5758	O + M, COMPREH		D	$110.06	
Z5759	O + M, COMPLEX		D	$174.75	
Z5760	O + M, GROUP		D	$30.30	
Z5761	PHYSICIAN EVAL CONSULT		D	$119.13	
Z5762	PHYSICIAN-REC REV		D	$59.56	
Z5763	SERV COORD		D	$92.75	
Z5764	VISION SERVICES		D	$119.13	

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