SECTION 404 (2) (d) Part 2
TOTAL CMHSP COSTS BY SERVICE CATEGORY AND CMHSP
FY 2004

Adults with Mental Illness
(Adult MI)

Overview

The data that are presented in this section was provided by CMHSPs as required by the FY 2004 MDCH/CMHSP contract. Cost data was collected from October 1, 2003 to September 30, 2004 and submitted to MDCH by January 3, 2005. The data in this section represents the total costs associated with providing mental health services to adults with mental illness (adult MI) by service category for each of the 46 CMHSPs within the State of Michigan.

Definitions for terms found in this section are presented in Section 404 (3).

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	54	8,474	$593,625	12.80%	$10,993	$70	157
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	691	1,112	$179,471	3.87%	$260	$161	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	13	35	$5,837	0.13%	$449	$167	3
Behavior Management Review	H2000	Encounter	5	12	$470	0.01%	$94	$39	2
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	129	817	$468,202	10.09%	$3,629	$573	6
Community Living Supports	H2015	15 Minutes	18	57,534	$248,723	5.36%	$13,818	$4	3,196
Community Living Supports	H2016	Days	45	8,456	$812,634	17.52%	$18,059	$96	188
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	71	295	$10,609	0.23%	$149	$36	4
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	1	4	$472	0.01%	$472	$118	4
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	5	223	$3,418	0.07%	$684	$15	45
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	4	179	$88,388	1.91%	$22,097	$494	45
Inpatient Psychiatric Services in Private IMD	0100	Days	26	231	$113,161	2.44%	$4,352	$490	9
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	22	334	$26,905	0.58%	$1,223	$81	15
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	608	2,852	$270,799	5.84%	$445	$95	5
MH Therapy & Counseling	90804- 90857	Encounter	566	6,916	$807,633	17.41%	$1,427	$117	12
Nursing Home MH Monitoring	T1017	15 Minutes	58	1,583	$91,663	1.98%	$1,580	$58	27
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	146	$4,410	0.10%	$4,410	$30	146
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	1	5	$1,265	0.03%	$1,265	$253	5
Peer-directed/operated Svs	H0038	15 Minutes	36	0	$69,276	1.49%	$1,924	$0	0
Personal care in Spec Res	T1020	Days	38	7,354	$231,790	5.00%	$6,100	$32	194

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	36	262	$26,273	0.57%	$730	$100	7
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	27	13,481	$113,819	2.45%	$4,216	$8	499
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	57	$6,950	0.15%	$6,950	$122	57
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	17	817	$30,197	0.65%	$1,776	$37	48
Supports Coordination	T1016	15 Minutes	4	158	$14,598	0.31%	$3,650	$92	40
Targeted Case Mangement	T1017	15 Minutes	182	11,473	$329,579	7.10%	$1,811	$29	63
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	486	1,028	$89,106	1.92%	$183	$87	2
Setting Total:					$4,639,273	100.00%	$1,475		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		1,030			$4,639,273	100.00%			

AuSable Valley

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	103	25,412	$674,235	24.96%	$6,546	$27	247
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	816	948	$38,133	1.41%	$47	$40	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	22	29	$5,392	0.20%	$245	$186	1
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	27	106	$72,546	2.69%	$2,687	$684	4
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	15	161	$775,499	28.71%	$51,700	$4,817	11
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	236	1,509	$52,000	1.92%	$220	$34	6
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	3	11	$584	0.02%	$195	$53	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	1	4	$11,583	0.43%	$11,583	$2,896	4
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	14	68	$4,302	0.16%	$307	$63	5
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	435	1,562	$251,851	9.32%	$579	$161	4
MH Therapy & Counseling	90804- 90857	Encounter	592	3,045	$310,576	11.50%	$525	$102	5
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	0	0	$0	0.00%	$0	$0	0

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	40	2,794	$61,381	2.27%	$1,535	$22	70
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	18	1,639	$36,008	1.33%	$2,000	$22	91
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	98	5,935	$206,772	7.65%	$2,110	$35	61
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	727	1,327	$200,751	7.43%	$276	$151	2
Setting Total:					$2,701,613	100.00%	$858		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		1,164			$2,701,613	100.00%			

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	10	1,729	$56,238	3.48%	$5,624	$33	173
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	108	180	$35,266	2.18%	$327	$196	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	12	13	$2,152	0.13%	$179	$166	1
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	30	235	$125,831	7.78%	$4,194	$535	8
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	4	607	$54,977	3.40%	$13,744	$91	152
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	175	1,008	$44,903	2.77%	$257	$45	6
Crisis Residential	H0018	Days	2	6	$3,420	0.21%	$1,710	$570	3
Electroconvulsive Therapy	90870, 0901 rev	Encounter	1	10	$1,403	0.09%	$1,403	$140	10
Electroconvulsive Therapy	00104	Minutes	1	7	$2,361	0.15%	$2,361	$337	7
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	27	51	$1,166	0.07%	$43	$23	2
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	1	1	$352	0.02%	$352	$352	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in Private IMD	0100	Days	14	210	$112,445	6.95%	$8,032	$535	15
Intensive Crisis Stabilization	S9484	Hour	170	319	$155,492	9.61%	$915	$487	2
Medication Administration	90782, 90788, 99506	Encounter	0	0	$0	0.00%	$0	$0	0
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	159	734	$34,923	2.16%	$220	$48	5
MH Therapy & Counseling	90804- 90857	Encounter	800	5,805	$625,162	38.63%	$781	$108	7
Nursing Home MH Monitoring	T1017	15 Minutes	4	50	$11,241	0.69%	$2,810	$225	13
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	16	17	$2,471	0.15%	$154	$145	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	35	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	4	625	$16,181	1.00%	$4,045	$26	156

Barry

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	2	1,320	$1,150	0.07%	$575	$1	660
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	3	312	$6,259	0.39%	$2,086	$20	104
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	90	1,250	$120,249	7.43%	$1,336	$96	14
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	17	152	$16,037	0.99%	$943	$106	9
Treatment (Person-centered) Planning	H0032	Encounter	36	36	$2,285	0.14%	$63	$63	1
Setting Total:					$1,431,964	88.49%	$832		
Day Program Setting	S5100	15 Minutes	18	21,938	$106,244	6.57%	$5,902	$5	1,219
Specialized Residential Setting	S5140, S5145	Days	3	638	$80,088	4.95%	$26,696	$126	213
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$186,332	11.51%	$8,873		
Total Population and Cost		897			$1,618,296	100.00%			

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	106	12,572	$1,167,650	13.09%	$11,016	$93	119
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,438	2,295	$371,163	4.16%	$258	$162	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	8	49	$6,360	0.07%	$795	$130	6
Behavior Management Review	H2000	Encounter	11	12	$2,088	0.02%	$190	$174	1
Clubhouse Program	H2030	15 Minutes	98	115,515	$185,288	2.08%	$1,891	$2	1,179
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	303	1,766	$788,959	8.84%	$2,604	$447	6
Community Living Supports	H2015	15 Minutes	16	29,087	$83,289	0.93%	$5,206	$3	1,818
Community Living Supports	H2016	Days	42	13,373	$939,910	10.54%	$22,379	$70	318
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	509	2,775	$186,517	2.09%	$366	$67	5
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	3	23	$125	0.00%	$42	$5	8
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	3	4	$578	0.01%	$193	$145	1
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	311	4,275	$101,168	1.13%	$325	$24	14
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	9	1,102	$567,729	6.36%	$63,081	$515	122
Inpatient Psychiatric Services in Private IMD	0100	Days	1	27	$16,632	0.19%	$16,632	$616	27
Intensive Crisis Stabilization	S9484	Hour	137	14,908	$181,938	2.04%	$1,328	$12	109
Medication Administration	90782, 90788, 99506	Encounter	67	711	$13,743	0.15%	$205	$19	11
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,867	8,646	$342,023	3.83%	$183	$40	5
MH Therapy & Counseling	90804- 90857	Encounter	1,247	12,064	$832,621	9.33%	$668	$69	10
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	5	159	$2,352	0.03%	$470	$15	32
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	4	5	$315	0.00%	$79	$63	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	170	315	$102,939	1.15%	$606	$327	2
Personal care in Spec Res	T1020	Days	33	10,096	$225,491	2.53%	$6,833	$22	306

Bay-Arenac

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	1	1	$155	0.00%	$155	$155	1
Respite Care	T1005, S5150	15 Minutes	24	40,008	$90,147	1.01%	$3,756	$2	1,667
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	18	15,487	$34,975	0.39%	$1,943	$2	860
Supports Coordination	T1016	15 Minutes	32	771	$31,714	0.36%	$991	$41	24
Targeted Case Mangement	T1017	15 Minutes	1,290	49,297	$2,294,077	25.72%	$1,778	$47	38
Transportation	T2003, T2004, T 2005	Encounter/Trip	27	6,946	$25,082	0.28%	$929	$4	257
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	505	668	$39,916	0.45%	$79	$60	1
Setting Total:					$8,634,944	96.80%	$1,042		
Day Program Setting	S5100	15 Minutes	25	81,238	$93,801	1.05%	$3,752	$1	3,250
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	27	7,917	$191,356	2.15%	$7,087	$24	293
Setting Total:					$285,157	3.20%	$5,484		
Total Population and Cost		2,899			$8,920,101	100.00%			

Berrien

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	67	4,585	$269,904	3.07%	$4,028	$59	68
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,351	1,843	$394,532	4.49%	$292	$214	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	1	18	$613	0.01%	$613	$34	18
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	5	6	$1,613	0.02%	$323	$269	1
Behavior Management Review	H2000	Encounter	3	7	$672	0.01%	$224	$96	2
Clubhouse Program	H2030	15 Minutes	55	74,100	$537,309	6.11%	$9,769	$7	1,347
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	271	1,794	$1,464,643	16.67%	$5,405	$816	7
Community Living Supports	H2015	15 Minutes	49	57,434	$233,196	2.65%	$4,759	$4	1,172
Community Living Supports	H2016	Days	45	5,188	$1,017,181	11.57%	$22,604	$196	115
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	10	37	$1,009	0.01%	$101	$27	4
Crisis Residential	H0018	Days	15	60	$19,537	0.22%	$1,302	$326	4
Electroconvulsive Therapy	90870, 0901 rev	Encounter	1	20	$6,013	0.07%	$6,013	$301	20
Electroconvulsive Therapy	00104	Minutes	1	4	$568	0.01%	$568	$142	4
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	29	88	$3,712	0.04%	$128	$42	3
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	17	2,040	$906,791	10.32%	$53,341	$445	120
Inpatient Psychiatric Services in Private IMD	0100	Days	12	205	$173,867	1.98%	$14,489	$848	17
Intensive Crisis Stabilization	S9484	Hour	126	225	$19,930	0.23%	$158	$89	2
Medication Administration	90782, 90788, 99506	Encounter	144	1,594	$113,602	1.29%	$789	$71	11
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,364	5,338	$431,775	4.91%	$317	$81	4
MH Therapy & Counseling	90804- 90857	Encounter	1,109	6,709	$735,702	8.37%	$663	$110	6
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$115	0.00%	$115	$115	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	45	5,330	$215,061	2.45%	$4,779	$40	118

Berrien

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	1	100	$251	0.00%	$251	$3	100
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	20	62,923	$165,956	1.89%	$8,298	$3	3,146
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	7	$846	0.01%	$846	$121	7
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	13	12,777	$60,255	0.69%	$4,635	$5	983
Supports Coordination	T1016	15 Minutes	40	726	$45,635	0.52%	$1,141	$63	18
Targeted Case Mangement	T1017	15 Minutes	392	12,327	$572,520	6.51%	$1,461	$46	31
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	2	4	$625	0.01%	$312	$156	2
Setting Total:					$7,393,431	84.13%	$1,425		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	44	6,056	$1,373,426	15.63%	$31,214	$227	138
Supported Independent Housing Setting	H0043	Days	3	305	$21,375	0.24%	$7,125	$70	102
Setting Total:					$1,394,801	15.87%	$29,677		
Total Population and Cost		2,575			$8,788,232	100.00%			

Clinton Eaton Ingham

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	82	8,906	$699,833	3.46%	$8,535	$79	109
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	2,348	3,702	$921,335	4.55%	$392	$249	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	1	1	$160	0.00%	$160	$160	1
Behavior Management Review	H2000	Encounter	52	91	$5,642	0.03%	$109	$62	2
Clubhouse Program	H2030	15 Minutes	0	0	$581,862	2.88%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	458	8,120	$2,650,693	13.10%	$5,788	$326	18
Community Living Supports	H2015	15 Minutes	11	4,359	$17,349	0.09%	$1,577	$4	396
Community Living Supports	H2016	Days	153	46,748	$3,155,151	15.60%	$20,622	$67	306
Community Living Supports	T2036, T2037	Session	2	2	$450	0.00%	$225	$225	1
Crisis Intervention	H2011	15 Minutes	82	401	$23,174	0.11%	$283	$58	5
Crisis Residential	H0018	Days	429	5,493	$1,427,136	7.05%	$3,327	$260	13
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	78	133	$17,572	0.09%	$225	$132	2
Health Services	S9445, S9446, S9470	Encounter	824	5,978	$343,268	1.70%	$417	$57	7
Health Services	97802, 97803, H0034, T1002	15 Minutes	460	1,833	$112,198	0.55%	$244	$61	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	26	34	$439	0.00%	$17	$13	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	47	3,526	$1,659,437	8.20%	$35,307	$471	75
Inpatient Psychiatric Services in Private IMD	0100	Days	110	822	$354,701	1.75%	$3,225	$432	7
Intensive Crisis Stabilization	S9484	Hour	1,032	1,667	$906,031	4.48%	$878	$544	2
Medication Administration	90782, 90788, 99506	Encounter	330	3,179	$184,223	0.91%	$558	$58	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	2,016	9,693	$1,298,138	6.42%	$644	$134	5
MH Therapy & Counseling	90804- 90857	Encounter	1,222	11,093	$1,738,833	8.60%	$1,423	$157	9
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	6	61	$3,468	0.02%	$578	$57	10
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$239	0.00%	$239	$239	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	179	3,836	$108,712	0.54%	$607	$28	21
Personal care in Spec Res	T1020	Days	153	46,699	$776,439	3.84%	$5,075	$17	305

Clinton Eaton Ingham

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	6	7	$1,442	0.01%	$240	$206	1
Respite Care	T1005, S5150	15 Minutes	5	527	$3,304	0.02%	$661	$6	105
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	111	3,671	$14,611	0.07%	$132	$4	33
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	1	$112	0.00%	$112	$112	1
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	44	3,094	$75,060	0.37%	$1,706	$24	70
Supports Coordination	T1016	15 Minutes	8	24	$925	0.00%	$116	$39	3
Targeted Case Mangement	T1017	15 Minutes	1,570	59,123	$2,654,623	13.12%	$1,691	$45	38
Transportation	T2003, T2004, T 2005	Encounter/Trip	5	5	$2,976	0.01%	$595	$595	1
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	506	592	$108,857	0.54%	$215	$184	1
Setting Total:					$19,848,393	98.11%	$1,606		
Day Program Setting	S5100	15 Minutes	57	45,947	$182,869	0.90%	$3,208	$4	806
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	99	7,928	$198,517	0.98%	$2,005	$25	80
Setting Total:					$381,386	1.89%	$2,445		
Total Population and Cost		3,972			$20,229,779	100.00%			

CMH for Central Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	52	7,442	$446,892	3.09%	$8,594	$60	143
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	3,352	4,913	$533,454	3.69%	$159	$109	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	66	77	$9,816	0.07%	$149	$127	1
Behavior Management Review	H2000	Encounter	2	2	$150	0.00%	$75	$75	1
Clubhouse Program	H2030	15 Minutes	122	190,279	$671,685	4.65%	$5,506	$4	1,560
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	329	2,066	$1,108,760	7.68%	$3,370	$537	6
Community Living Supports	H2015	15 Minutes	190	152,178	$534,145	3.70%	$2,811	$4	801
Community Living Supports	H2016	Days	55	5,927	$349,693	2.42%	$6,358	$59	108
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	679	3,317	$181,671	1.26%	$268	$55	5
Crisis Residential	H0018	Days	56	499	$75,833	0.53%	$1,354	$152	9
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	3	8	$5,308	0.04%	$1,769	$664	3
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	81	135	$9,877	0.07%	$122	$73	2
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	2	3	$9,876	0.07%	$4,938	$3,292	2
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	90	446	$14,116	0.10%	$157	$32	5
Health Services	97802, 97803, H0034, T1002	15 Minutes	764	3,067	$94,893	0.66%	$124	$31	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	34	73	$11,917	0.08%	$351	$163	2
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	23	2,301	$1,047,783	7.26%	$45,556	$455	100
Inpatient Psychiatric Services in Private IMD	0100	Days	33	300	$161,001	1.11%	$4,879	$537	9
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	128	1,359	$52,770	0.37%	$412	$39	11
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,992	9,133	$604,422	4.19%	$303	$66	5
MH Therapy & Counseling	90804- 90857	Encounter	4,173	33,318	$2,615,130	18.11%	$627	$78	8
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	1	$21	0.00%	$21	$21	1
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	5	7	$585	0.00%	$117	$84	1
Partial Hospitalization	Rev 0912, 0913	Days	3	11	$3,055	0.02%	$1,018	$278	4
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	60	5,952	$334,919	2.32%	$5,582	$56	99

CMH for Central Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	7	52	$30,802	0.21%	$4,400	$592	7
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	282	692	$51,042	0.35%	$181	$74	2
Respite Care	T1005, S5150	15 Minutes	23	11,703	$18,040	0.12%	$784	$2	509
Respite Care	S5151, H0045	Days	3	4	$1,503	0.01%	$501	$376	1
Skill-building Assistance	H2014	15 Minutes	105	16,815	$46,073	0.32%	$439	$3	160
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	2	3	$201	0.00%	$101	$67	2
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	12	8,238	$18,618	0.13%	$1,552	$2	687
Supports Coordination	T1016	15 Minutes	69	1,047	$72,075	0.50%	$1,045	$69	15
Targeted Case Mangement	T1017	15 Minutes	1,128	56,198	$3,868,670	26.79%	$3,430	$69	50
Transportation	T2003, T2004, T 2005	Encounter/Trip	8	473	$5,345	0.04%	$668	$11	59
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	81	1,145	$18,801	0.13%	$232	$16	14
Treatment (Person-centered) Planning	H0032	Encounter	2,039	2,201	$247,172	1.71%	$121	$112	1
Setting Total:					$13,256,114	91.80%	$826		
Day Program Setting	S5100	15 Minutes	20	53,668	$103,043	0.71%	$5,152	$2	2,683
Specialized Residential Setting	S5140, S5145	Days	56	5,781	$693,084	4.80%	$12,377	$120	103
Supported Independent Housing Setting	H0043	Days	33	5,210	$388,041	2.69%	$11,759	$74	158
Setting Total:					$1,184,168	8.20%	$10,864		
Total Population and Cost		6,181			$14,440,282	100.00%			

CMHSA Network of West MI

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	214	19,587	$1,332,857	4.39%	$6,228	$68	92
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	4,313	6,135	$810,757	2.67%	$188	$132	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	37	113	$749	0.00%	$20	$7	3
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	0	0	$0	0.00%	$0	$0	0
Behavior Management Review	H2000	Encounter	25	31	$1,075	0.00%	$43	$35	1
Clubhouse Program	H2030	15 Minutes	235	427,009	$976,482	3.22%	$4,155	$2	1,817
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	151	1,757	$1,045,423	3.44%	$6,923	$595	12
Community Living Supports	H2015	15 Minutes	55	14,574	$27,552	0.09%	$501	$2	265
Community Living Supports	H2016	Days	156	25,353	$4,727,333	15.57%	$30,303	$186	163
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	1,217	6,959	$478,981	1.58%	$394	$69	6
Crisis Residential	H0018	Days	561	3,863	$851,728	2.80%	$1,518	$220	7
Electroconvulsive Therapy	90870, 0901 rev	Encounter	14	251	$11,755	0.04%	$840	$47	18
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	947	10,647	$945,850	3.11%	$999	$89	11
Health Services	97802, 97803, H0034, T1002	15 Minutes	132	6,190	$440,771	1.45%	$3,339	$71	47
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	114	184	$50,400	0.17%	$442	$274	2
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	48	5,816	$2,670,503	8.79%	$55,635	$459	121
Inpatient Psychiatric Services in Private IMD	0100	Days	638	8,389	$4,773,844	15.72%	$7,483	$569	13
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	285	3,357	$247,052	0.81%	$867	$74	12
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	3,882	14,145	$717,405	2.36%	$185	$51	4
MH Therapy & Counseling	90804- 90857	Encounter	2,467	14,728	$109,584	0.36%	$44	$7	6
Nursing Home MH Monitoring	T1017	15 Minutes	157	3,551	$258,521	0.85%	$1,647	$73	23
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	260	1,414	$397,534	1.31%	$1,529	$281	5
Peer-directed/operated Svs	H0038	15 Minutes	226	0	$92,484	0.30%	$409	$0	0
Personal care in Spec Res	T1020	Days	136	22,008	$1,648,638	5.43%	$12,122	$75	162

CMHSA Network of West MI

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	36	276	$63,852	0.21%	$1,774	$231	8
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	8	26,347	$82,878	0.27%	$10,360	$3	3,293
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	218	135,272	$535,106	1.76%	$2,455	$4	621
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	2,598	87,216	$6,584,828	21.68%	$2,535	$76	34
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	19	37	$2,301	0.01%	$121	$62	2
Setting Total:					$29,886,243	98.42%	$1,561		
Day Program Setting	S5100	15 Minutes	50	130,545	$375,256	1.24%	$7,505	$3	2,611
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	6	1,763	$104,882	0.35%	$17,480	$59	294
Setting Total:					$480,138	1.58%	$8,574		
Total Population and Cost		7,667			$30,366,381	100.00%			

Copper Country

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	42	9,728	$451,087	8.38%	$10,740	$46	232
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	601	1,739	$245,442	4.56%	$408	$141	3
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	63	282	$6,132	0.11%	$97	$22	4
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	9	30	$4,234	0.08%	$470	$141	3
Behavior Management Review	H2000	Encounter	13	24	$1,800	0.03%	$138	$75	2
Clubhouse Program	H2030	15 Minutes	33	46,498	$169,718	3.15%	$5,143	$4	1,409
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	53	764	$705,721	13.11%	$13,315	$924	14
Community Living Supports	H2015	15 Minutes	193	49,072	$397,483	7.39%	$2,059	$8	254
Community Living Supports	H2016	Days	26	6,630	$859,082	15.96%	$33,042	$130	255
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	277	3,015	$234,748	4.36%	$847	$78	11
Crisis Residential	H0018	Days	37	723	$164,143	3.05%	$4,436	$227	20
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	14	148	$4,986	0.09%	$356	$34	11
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	90	1,936	$44,644	0.83%	$496	$23	22
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	197	2,150	$57,498	1.07%	$292	$27	11
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	620	$299,583	5.57%	$59,917	$483	124
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	4	1,061	$82,599	1.53%	$20,650	$78	265
Medication Administration	90782, 90788, 99506	Encounter	24	174	$11,347	0.21%	$473	$65	7
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	444	2,876	$256,884	4.77%	$579	$89	6
MH Therapy & Counseling	90804- 90857	Encounter	297	2,276	$381,162	7.08%	$1,283	$167	8
Nursing Home MH Monitoring	T1017	15 Minutes	44	2,064	$71,654	1.33%	$1,629	$35	47
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	18	171	$7,286	0.14%	$405	$43	10
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	7	8	$2,268	0.04%	$324	$284	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	55	14,560	$48,630	0.90%	$884	$3	265
Personal care in Spec Res	T1020	Days	26	6,935	$92,455	1.72%	$3,556	$13	267

Copper Country

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	34	170	$58,243	1.08%	$1,713	$343	5
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	47	21,718	$141,601	2.63%	$3,013	$7	462
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	219	5,861	$334,396	6.21%	$1,527	$57	27
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	539	697	$147,151	2.73%	$273	$211	1
Setting Total:					$5,281,977	98.14%	$1,549		
Day Program Setting	S5100	15 Minutes	21	31,751	$100,016	1.86%	$4,763	$3	1,512
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$100,016	1.86%	$4,763		
Total Population and Cost		910			$5,381,993	100.00%			

Detroit-Wayne

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	1,368	225,373	$12,172,396	6.10%	$8,898	$54	165
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	25,775	47,501	$6,906,793	3.46%	$268	$145	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	72	136	$23,533	0.01%	$327	$173	2
Behavior Management Review	H2000	Encounter	1,621	3,123	$385,285	0.19%	$238	$123	2
Clubhouse Program	H2030	15 Minutes	729	1,035,485	$3,758,811	1.88%	$5,156	$4	1,420
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	4,729	49,335	$28,609,080	14.35%	$6,050	$580	10
Community Living Supports	H2015	15 Minutes	184	10,912	$39,501	0.02%	$215	$4	59
Community Living Supports	H2016	Days	2,149	317,379	$15,408,177	7.73%	$7,170	$49	148
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	588	4,140	$265,912	0.13%	$452	$64	7
Crisis Residential	H0018	Days	509	6,392	$1,617,751	0.81%	$3,178	$253	13
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	327	1,932	$279,966	0.14%	$856	$145	6
Health Services	S9445, S9446, S9470	Encounter	4,822	19,784	$552,220	0.28%	$115	$28	4
Health Services	97802, 97803, H0034, T1002	15 Minutes	5,126	32,061	$922,030	0.46%	$180	$29	6
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	280	6,250	$597,938	0.30%	$2,135	$96	22
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	458	102,280	$44,837,720	22.48%	$97,899	$438	223
Inpatient Psychiatric Services in Private IMD	0100	Days	358	3,567	$2,033,190	1.02%	$5,679	$570	10
Intensive Crisis Stabilization	S9484	Hour	6,537	58,297	$2,783,130	1.40%	$426	$48	9
Medication Administration	90782, 90788, 99506	Encounter	3,209	13,653	$778,427	0.39%	$243	$57	4
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	15,765	84,778	$4,826,412	2.42%	$306	$57	5
MH Therapy & Counseling	90804- 90857	Encounter	12,930	88,261	$9,845,877	4.94%	$761	$112	7
Nursing Home MH Monitoring	T1017	15 Minutes	9,680	320,519	$20,304,879	10.18%	$2,098	$63	33
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	86	454	$12,030	0.01%	$140	$26	5
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	396	1,566	$157,434	0.08%	$398	$101	4
Partial Hospitalization	Rev 0912, 0913	Days	362	2,974	$799,173	0.40%	$2,208	$269	8
Peer-directed/operated Svs	H0038	15 Minutes	270	95,765	$499,893	0.25%	$1,851	$5	355
Personal care in Spec Res	T1020	Days	2,064	225,245	$10,039,446	5.03%	$4,864	$45	109

Detroit-Wayne

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	18	837	$79,080	0.04%	$4,393	$94	47
Respite Care	T1005, S5150	15 Minutes	1	1	$4	0.00%	$4	$4	1
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	332	49,547	$168,955	0.08%	$509	$3	149
Supports Coordination	T1016	15 Minutes	250	3,689	$273,318	0.14%	$1,093	$74	15
Targeted Case Mangement	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Transportation	T2003, T2004, T 2005	Encounter/Trip	1,539	2,401	$281,757	0.14%	$183	$117	2
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	1,545	35,689	$135,618	0.07%	$88	$4	23
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	9,442	24,268	$1,324,305	0.66%	$140	$55	3
Setting Total:					$170,720,041	85.61%	$1,504		
Day Program Setting	S5100	15 Minutes	1,813	1,926,882	$7,071,657	3.55%	$3,901	$4	1,063
Specialized Residential Setting	S5140, S5145	Days	2,196	199,191	$17,591,574	8.82%	$8,011	$88	91
Supported Independent Housing Setting	H0043	Days	268	47,186	$3,138,341	1.57%	$11,710	$67	176
Setting Total:					$27,801,572	13.94%	$6,500		
Total Population and Cost		27,470			$199,413,802	100.00%			

Genesee

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	390	50,231	$2,724,027	8.79%	$6,985	$54	129
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	5,820	11,662	$1,282,799	4.14%	$220	$110	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	19	32	$6,385	0.02%	$336	$200	2
Behavior Management Review	H2000	Encounter	8	11	$1,085	0.00%	$136	$99	1
Clubhouse Program	H2030	15 Minutes	194	234,512	$1,329,683	4.29%	$6,854	$6	1,209
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	1,063	8,569	$3,946,624	12.73%	$3,713	$461	8
Community Living Supports	H2015	15 Minutes	82	26,649	$252,632	0.82%	$3,081	$9	325
Community Living Supports	H2016	Days	203	42,612	$3,790,305	12.23%	$18,671	$89	210
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	417	1,927	$124,272	0.40%	$298	$64	5
Crisis Residential	H0018	Days	457	2,910	$659,755	2.13%	$1,444	$227	6
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	6	6	$1,158	0.00%	$193	$193	1
Health Services	S9445, S9446, S9470	Encounter	129	840	$73,687	0.24%	$571	$88	7
Health Services	97802, 97803, H0034, T1002	15 Minutes	475	4,523	$653,195	2.11%	$1,375	$144	10
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	219	323	$11,931	0.04%	$54	$37	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	75	12,172	$4,442,901	14.34%	$59,239	$365	162
Inpatient Psychiatric Services in Private IMD	0100	Days	1	3	$1,095	0.00%	$1,095	$365	3
Intensive Crisis Stabilization	S9484	Hour	171	1,382	$138,904	0.45%	$812	$101	8
Medication Administration	90782, 90788, 99506	Encounter	425	4,169	$239,676	0.77%	$564	$57	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	2,970	11,192	$1,816,685	5.86%	$612	$162	4
MH Therapy & Counseling	90804- 90857	Encounter	1,089	5,982	$379,759	1.23%	$349	$63	5
Nursing Home MH Monitoring	T1017	15 Minutes	57	593	$45,477	0.15%	$798	$77	10
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	127	195	$38,910	0.13%	$306	$200	2
Partial Hospitalization	Rev 0912, 0913	Days	190	1,358	$190,228	0.61%	$1,001	$140	7
Peer-directed/operated Svs	H0038	15 Minutes	50	201	$7,424	0.02%	$148	$37	4
Personal care in Spec Res	T1020	Days	75	6,904	$430,013	1.39%	$5,734	$62	92

Genesee

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	7	6,349	$27,999	0.09%	$4,000	$4	907
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	19	455	$1,114	0.00%	$59	$2	24
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	9	23	$4,589	0.01%	$510	$200	3
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	0	0	$0	0.00%	$0	$0	0
Supports Coordination	T1016	15 Minutes	24	360	$34,444	0.11%	$1,435	$96	15
Targeted Case Mangement	T1017	15 Minutes	1,797	69,584	$5,336,396	17.22%	$2,970	$77	39
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	30	2,692	$35,426	0.11%	$1,181	$13	90
Treatment (Person-centered) Planning	H0032	Encounter	557	891	$72,710	0.23%	$131	$82	2
Setting Total:					$28,101,288	90.67%	$1,638		
Day Program Setting	S5100	15 Minutes	107	280,686	$741,011	2.39%	$6,925	$3	2,623
Specialized Residential Setting	S5140, S5145	Days	160	12,277	$2,053,626	6.63%	$12,835	$167	77
Supported Independent Housing Setting	H0043	Days	10	953	$91,230	0.29%	$9,123	$96	95
Setting Total:					$2,885,867	9.31%	$10,418		
Total Population and Cost		7,080			$30,991,918	100.00%			

Gogebic

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	26	6,247	$193,657	13.48%	$7,448	$31	240
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	230	386	$170,624	11.87%	$742	$442	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	2	2	$120	0.01%	$60	$60	1
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	13	70	$16,380	1.14%	$1,260	$234	5
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	30	250	$157,018	10.93%	$5,234	$628	8
Community Living Supports	H2015	15 Minutes	66	1,407	$30,839	2.15%	$467	$22	21
Community Living Supports	H2016	Days	1	112	$16,570	1.15%	$16,570	$148	112
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	148	861	$50,368	3.51%	$340	$58	6
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	32	35	$8,365	0.58%	$261	$239	1
Health Services	97802, 97803, H0034, T1002	15 Minutes	123	436	$26,051	1.81%	$212	$60	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	4	4	$815	0.06%	$204	$204	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	1	233	$64,340	4.48%	$64,340	$276	233
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	16	154	$9,202	0.64%	$575	$60	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	145	866	$175,361	12.20%	$1,209	$202	6
MH Therapy & Counseling	90804- 90857	Encounter	52	276	$46,895	3.26%	$902	$170	5
Nursing Home MH Monitoring	T1017	15 Minutes	16	177	$6,859	0.48%	$429	$39	11
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$98	0.01%	$98	$98	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	33	30,353	$96,826	6.74%	$2,934	$3	920
Personal care in Spec Res	T1020	Days	1	112	$4,401	0.31%	$4,401	$39	112

Gogebic

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	9	4,176	$36,665	2.55%	$4,074	$9	464
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	24	2,936	$25,778	1.79%	$1,074	$9	122
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	158	4,965	$192,394	13.39%	$1,218	$39	31
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	54	129	$24,608	1.71%	$456	$191	2
Setting Total:					$1,354,234	94.24%	$1,143		
Day Program Setting	S5100	15 Minutes	1	1,720	$2,907	0.20%	$2,907	$2	1,720
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$2,907	0.20%	$2,907		
Total Population and Cost		399			$1,436,994	100.00%			

Gratiot

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	260	1,454	$205,362	9.53%	$790	$141	6
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	4	13	$2,945	0.14%	$736	$227	3
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	38	35,817	$156,162	7.25%	$4,110	$4	943
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	57	577	$400,181	18.57%	$7,021	$694	10
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	1	21	$1,534	0.07%	$1,534	$73	21
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	259	1,568	$66,828	3.10%	$258	$43	6
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	166	1,737	$128,538	5.96%	$774	$74	10
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	1	216	$105,111	4.88%	$105,111	$487	216
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	0	0	$0	0.00%	$0	$0	0
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	243	1,058	$94,268	4.37%	$388	$89	4
MH Therapy & Counseling	90804- 90857	Encounter	287	2,958	$335,165	15.55%	$1,168	$113	10
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	29	323	$124,113	5.76%	$4,280	$384	11
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	4	54	$3,944	0.18%	$986	$73	14

Gratiot

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	3	1,473	$18,133	0.84%	$6,044	$12	491
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	5	236	$1,185	0.05%	$237	$5	47
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	240	10,729	$511,773	23.75%	$2,132	$48	45
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	0	0	$0	0.00%	$0	$0	0
Setting Total:					$2,155,242	100.00%	$1,350		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		693			$2,155,242	100.00%			

Hiawatha

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	86	12,585	$224,380	6.14%	$2,609	$18	146
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	785	1,378	$382,995	10.48%	$488	$278	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	5	22	$2,210	0.06%	$442	$100	4
Behavior Management Review	H2000	Encounter	4	5	$639	0.02%	$160	$128	1
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	95	728	$432,918	11.85%	$4,557	$595	8
Community Living Supports	H2015	15 Minutes	10	1,866	$18,258	0.50%	$1,826	$10	187
Community Living Supports	H2016	Days	7	2,309	$533,038	14.59%	$76,148	$231	330
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	741	1,359	$90,687	2.48%	$122	$67	2
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	11	81	$1,773	0.05%	$161	$22	7
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	6	603	$133,394	3.65%	$22,232	$221	101
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	26	2,214	$19,870	0.54%	$764	$9	85
Medication Administration	90782, 90788, 99506	Encounter	36	590	$5,986	0.16%	$166	$10	16
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	483	3,009	$463,089	12.68%	$959	$154	6
MH Therapy & Counseling	90804- 90857	Encounter	696	2,770	$199,109	5.45%	$286	$72	4
Nursing Home MH Monitoring	T1017	15 Minutes	22	571	$12,355	0.34%	$562	$22	26
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	107	24,394	$185,023	5.06%	$1,729	$8	228
Personal care in Spec Res	T1020	Days	12	2,309	$28,055	0.77%	$2,338	$12	192

Hiawatha

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	45	40,134	$288,155	7.89%	$6,403	$7	892
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	46	33,101	$249,614	6.83%	$5,426	$8	720
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	4	4	$911	0.02%	$228	$228	1
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	27	4,266	$35,544	0.97%	$1,316	$8	158
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	272	9,040	$151,281	4.14%	$556	$17	33
Transportation	T2003, T2004, T 2005	Encounter/Trip	46	2,492	$27,740	0.76%	$603	$11	54
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	120	131	$17,943	0.49%	$150	$137	1
Setting Total:					$3,504,967	95.93%	$949		
Day Program Setting	S5100	15 Minutes	17	21,548	$148,579	4.07%	$8,740	$7	1,268
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$148,579	4.07%	$8,740		
Total Population and Cost		949			$3,653,546	100.00%			

Huron

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	75	14,334	$742,794	31.19%	$9,904	$52	191
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	187	423	$104,217	4.38%	$557	$246	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	7	30	$2,166	0.09%	$309	$72	4
Behavior Management Review	H2000	Encounter	2	2	$123	0.01%	$62	$62	1
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	40	265	$140,628	5.90%	$3,516	$531	7
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	5	67	$14,177	0.60%	$2,835	$212	13
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	294	2,535	$184,089	7.73%	$626	$73	9
Crisis Residential	H0018	Days	64	908	$300,365	12.61%	$4,693	$331	14
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	2	6	$235	0.01%	$118	$39	3
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	18	19	$8,355	0.35%	$464	$440	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	2	43	$20,199	0.85%	$10,099	$470	22
Inpatient Psychiatric Services in Private IMD	0100	Days	1	20	$2,954	0.12%	$2,954	$148	20
Intensive Crisis Stabilization	S9484	Hour	1	3	$289	0.01%	$289	$96	3
Medication Administration	90782, 90788, 99506	Encounter	10	58	$1,807	0.08%	$181	$31	6
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	286	1,497	$121,352	5.09%	$424	$81	5
MH Therapy & Counseling	90804- 90857	Encounter	212	2,154	$318,103	13.36%	$1,500	$148	10
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	8	$131	0.01%	$131	$16	8
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$85	0.00%	$85	$85	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	25	0	$70,447	2.96%	$2,818	$0	0
Personal care in Spec Res	T1020	Days	5	67	$3,413	0.14%	$683	$51	13

Huron

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	33	365	$15,284	0.64%	$463	$42	11
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	39	12,788	$94,984	3.99%	$2,435	$7	328
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	35	21,667	$105,992	4.45%	$3,028	$5	619
Supports Coordination	T1016	15 Minutes	3	2	$381	0.02%	$127	$191	1
Targeted Case Mangement	T1017	15 Minutes	160	7,307	$117,059	4.91%	$732	$16	46
Transportation	T2003, T2004, T 2005	Encounter/Trip	3	34	$136	0.01%	$45	$4	11
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	0	0	$0	0.00%	$0	$0	0
Setting Total:					$2,369,765	99.49%	$1,568		
Day Program Setting	S5100	15 Minutes	8	4,546	$12,082	0.51%	$1,510	$3	568
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$12,082	0.51%	$1,510		
Total Population and Cost		638			$2,381,847	100.00%			

Ionia

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	39	6,003	$305,982	12.66%	$7,846	$51	154
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	255	282	$75,531	3.13%	$296	$268	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	16	51	$4,539	0.19%	$284	$89	3
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	10	41	$3,659	0.15%	$366	$89	4
Behavior Management Review	H2000	Encounter	1	3	$183	0.01%	$183	$61	3
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	32	338	$237,539	9.83%	$7,423	$703	11
Community Living Supports	H2015	15 Minutes	47	4,628	$23,000	0.95%	$489	$5	98
Community Living Supports	H2016	Days	7	2,547	$135,978	5.63%	$19,425	$53	364
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	167	1,098	$52,347	2.17%	$313	$48	7
Crisis Residential	H0018	Days	10	25	$8,241	0.34%	$824	$330	3
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	1	1	$242	0.01%	$242	$242	1
Health Services	S9445, S9446, S9470	Encounter	1	4	$299	0.01%	$299	$75	4
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	11	13	$7,927	0.33%	$721	$610	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	4	87	$38,876	1.61%	$9,719	$447	22
Inpatient Psychiatric Services in Private IMD	0100	Days	21	246	$97,171	4.02%	$4,627	$395	12
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	8	70	$6,596	0.27%	$824	$94	9
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	359	1,855	$274,889	11.38%	$766	$148	5
MH Therapy & Counseling	90804- 90857	Encounter	618	4,482	$270,347	11.19%	$437	$60	7
Nursing Home MH Monitoring	T1017	15 Minutes	7	112	$10,598	0.44%	$1,514	$95	16
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$70,005	2.90%	$0	$0	0
Personal care in Spec Res	T1020	Days	7	2,546	$135,978	5.63%	$19,425	$53	364

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	3	3	$939	0.04%	$313	$313	1
Respite Care	T1005, S5150	15 Minutes	3	1,353	$10,415	0.43%	$3,472	$8	451
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	7	580	$11,578	0.48%	$1,654	$20	83
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	32	332	$4,330	0.18%	$135	$13	10
Supports Coordination	T1016	15 Minutes	19	147	$8,157	0.34%	$429	$55	8
Targeted Case Mangement	T1017	15 Minutes	306	9,891	$582,249	24.10%	$1,903	$59	32
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	97	112	$38,592	1.60%	$398	$345	1
Setting Total:					$2,416,188	100.00%	$1,157		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		989			$2,416,188	100.00%			

Kalamazoo

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	361	77,016	$2,404,856	11.71%	$6,662	$31	213
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,629	5,126	$1,032,782	5.03%	$634	$201	3
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	33	95	$6,341	0.03%	$192	$67	3
Behavior Management Review	H2000	Encounter	10	27	$5,800	0.03%	$580	$215	3
Clubhouse Program	H2030	15 Minutes	138	224,524	$550,982	2.68%	$3,993	$2	1,627
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	164	1,577	$1,067,372	5.20%	$6,508	$677	10
Community Living Supports	H2015	15 Minutes	48	264,756	$654,697	3.19%	$13,640	$2	5,516
Community Living Supports	H2016	Days	209	60,855	$3,274,895	15.95%	$15,669	$54	291
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	562	3,105	$864,560	4.21%	$1,538	$278	6
Crisis Residential	H0018	Days	257	4,976	$795,528	3.87%	$3,095	$160	19
Electroconvulsive Therapy	90870, 0901 rev	Encounter	3	13	$5,858	0.03%	$1,953	$451	4
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	1,322	7,421	$673,994	3.28%	$510	$91	6
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	61	617	$277,986	1.35%	$4,557	$451	10
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	86	4,894	$2,599,713	12.66%	$30,229	$531	57
Inpatient Psychiatric Services in Private IMD	0100	Days	7	70	$51,232	0.25%	$7,319	$732	10
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	177	1,525	$36,444	0.18%	$206	$24	9
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,499	5,101	$272,175	1.33%	$182	$53	3
MH Therapy & Counseling	90804- 90857	Encounter	397	3,898	$298,367	1.45%	$752	$77	10
Nursing Home MH Monitoring	T1017	15 Minutes	29	301	$41,382	0.20%	$1,427	$137	10
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$122,742	0.60%	$0	$0	0
Personal care in Spec Res	T1020	Days	240	30,562	$2,405,893	11.72%	$10,025	$79	127

Kalamazoo

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	4	3,216	$6,838	0.03%	$1,710	$2	804
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	238	17,214	$404,713	1.97%	$1,700	$24	72
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	895	46,935	$2,679,924	13.05%	$2,994	$57	52
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	0	0	$0	0.00%	$0	$0	0
Setting Total:					$20,535,074	100.00%	$2,454		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		2,840			$20,535,074	100.00%			

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	41	8,248	$335,126	9.05%	$8,174	$41	201
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	414	634	$137,607	3.71%	$332	$217	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	6	7	$3,514	0.09%	$586	$502	1
Behavior Management Review	H2000	Encounter	12	24	$1,118	0.03%	$93	$47	2
Clubhouse Program	H2030	15 Minutes	44	118,417	$326,412	8.81%	$7,418	$3	2,691
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	89	679	$440,407	11.89%	$4,948	$649	8
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	43	10,312	$505,338	13.64%	$11,752	$49	240
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	21	112	$5,362	0.14%	$255	$48	5
Crisis Residential	H0018	Days	10	97	$18,041	0.49%	$1,804	$186	10
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	6	21	$970	0.03%	$162	$46	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	6	646	$322,899	8.72%	$53,817	$500	108
Inpatient Psychiatric Services in Private IMD	0100	Days	1	4	$2,594	0.07%	$2,594	$649	4
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	14	144	$10,940	0.30%	$781	$76	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	341	1,302	$118,640	3.20%	$348	$91	4
MH Therapy & Counseling	90804- 90857	Encounter	350	2,779	$469,549	12.67%	$1,342	$169	8
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	4	4	$742	0.02%	$186	$186	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	110	$89,874	2.43%	$0	$817	0
Personal care in Spec Res	T1020	Days	42	10,351	$116,673	3.15%	$2,778	$11	246

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	1	104	$444	0.01%	$444	$4	104
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	4	10,693	$17,494	0.47%	$4,374	$2	2,673
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	5	2,799	$14,446	0.39%	$2,889	$5	560
Supports Coordination	T1016	15 Minutes	9	144	$10,428	0.28%	$1,159	$72	16
Targeted Case Mangement	T1017	15 Minutes	207	6,136	$457,895	12.36%	$2,212	$75	30
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	166	197	$28,065	0.76%	$169	$142	1
Setting Total:					$3,434,578	92.70%	$1,871		
Day Program Setting	S5100	15 Minutes	3	7,560	$26,186	0.71%	$8,729	$3	2,520
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	16	5,502	$244,209	6.59%	$15,263	$44	344
Setting Total:					$270,395	7.30%	$14,231		
Total Population and Cost		688			$3,704,973	100.00%			

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Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	505	782	$314,410	6.60%	$623	$402	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	0	0	$0	0.00%	$0	$0	0
Behavior Management Review	H2000	Encounter	4	6	$3,000	0.06%	$750	$500	2
Clubhouse Program	H2030	15 Minutes	80	92,913	$703,234	14.76%	$8,790	$8	1,161
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	108	426	$262,762	5.52%	$2,433	$617	4
Community Living Supports	H2015	15 Minutes	20	112,244	$358,482	7.52%	$17,924	$3	5,612
Community Living Supports	H2016	Days	22	3,987	$615,316	12.92%	$27,969	$154	181
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	147	278	$126,127	2.65%	$858	$454	2
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	23	1,432	$125,289	2.63%	$5,447	$87	62
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	0	0	$100,000	2.10%	$0	$0	0
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	19	77	$11,165	0.23%	$588	$145	4
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	782	5,804	$833,043	17.49%	$1,065	$144	7
MH Therapy & Counseling	90804- 90857	Encounter	63	746	$79,665	1.67%	$1,265	$107	12
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$64,381	1.35%	$0	$0	0
Personal care in Spec Res	T1020	Days	22	3,987	$208,345	4.37%	$9,470	$52	181

Lenawee

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	4	6,918	$20,477	0.43%	$5,119	$3	1,730
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	0	0	$0	0.00%	$0	$0	0
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	836	9,243	$848,266	17.81%	$1,015	$92	11
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	32	337	$90,056	1.89%	$2,814	$267	11
Setting Total:					$4,764,018	100.00%	$1,786		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		968			$4,764,018	100.00%			

Lifeways

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	391	77,517	$2,054,074	17.20%	$5,253	$26	198
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	3,277	5,566	$790,272	6.62%	$241	$142	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	3	12	$285	0.00%	$95	$24	4
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	31	85	$7,783	0.07%	$251	$92	3
Behavior Management Review	H2000	Encounter	50	56	$3,123	0.03%	$62	$56	1
Clubhouse Program	H2030	15 Minutes	54	26,657	$78,876	0.66%	$1,461	$3	494
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	301	2,880	$1,690,897	14.16%	$5,618	$587	10
Community Living Supports	H2015	15 Minutes	89	14,189	$141,035	1.18%	$1,585	$10	159
Community Living Supports	H2016	Days	31	5,224	$578,116	4.84%	$18,649	$111	169
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	162	35,330	$62,876	0.53%	$388	$2	218
Crisis Residential	H0018	Days	211	1,490	$295,020	2.47%	$1,398	$198	7
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	32	250	$1,241	0.01%	$39	$5	8
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	25	198	$13,098	0.11%	$524	$66	8
Health Services	97802, 97803, H0034, T1002	15 Minutes	25	758	$25,048	0.21%	$1,002	$33	30
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	8	1,302	$497,616	4.17%	$62,202	$382	163
Inpatient Psychiatric Services in Private IMD	0100	Days	49	509	$272,498	2.28%	$5,561	$535	10
Intensive Crisis Stabilization	S9484	Hour	760	1,460	$240,414	2.01%	$316	$165	2
Medication Administration	90782, 90788, 99506	Encounter	39	373	$8,370	0.07%	$215	$22	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,707	8,019	$927,558	7.77%	$543	$116	5
MH Therapy & Counseling	90804- 90857	Encounter	2,313	16,857	$1,496,531	12.53%	$647	$89	7
Nursing Home MH Monitoring	T1017	15 Minutes	14	229	$3,666	0.03%	$262	$16	16
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	14	218	$7,109	0.06%	$508	$33	16
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	5	5	$774	0.01%	$155	$155	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	192	168,958	$295,129	2.47%	$1,537	$2	880
Personal care in Spec Res	T1020	Days	27	10,928	$885,496	7.41%	$32,796	$81	405

Lifeways

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	50	465	$10,352	0.09%	$207	$22	9
Respite Care	T1005, S5150	15 Minutes	2	570	$963	0.01%	$481	$2	285
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	260	74,926	$157,307	1.32%	$605	$2	288
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	29	2,161	$10,287	0.09%	$355	$5	75
Supports Coordination	T1016	15 Minutes	23	1,455	$21,829	0.18%	$949	$15	63
Targeted Case Mangement	T1017	15 Minutes	956	62,369	$1,362,049	11.40%	$1,425	$22	65
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	12	257	$4,008	0.03%	$334	$16	21
Setting Total:					$11,943,699	100.00%	$1,072		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		5,025			$11,943,699	100.00%			

Livingston

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	77	16,054	$788,952	14.61%	$10,246	$49	208
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	479	610	$275,250	5.10%	$575	$451	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	10	10	$466	0.01%	$47	$47	1
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	7	22	$3,742	0.07%	$535	$170	3
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	112	97,748	$373,433	6.92%	$3,334	$4	873
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	109	1,144	$713,044	13.21%	$6,542	$623	10
Community Living Supports	H2015	15 Minutes	128	84,421	$374,252	6.93%	$2,924	$4	660
Community Living Supports	H2016	Days	5	885	$147,945	2.74%	$29,589	$167	177
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	228	2,449	$106,225	1.97%	$466	$43	11
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	36	220	$18,099	0.34%	$503	$82	6
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	4	5	$1,139	0.02%	$285	$228	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	195	$83,620	1.55%	$16,724	$429	39
Inpatient Psychiatric Services in Private IMD	0100	Days	5	12	$7,479	0.14%	$1,496	$623	2
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	180	923	$28,286	0.52%	$157	$31	5
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	691	3,595	$493,845	9.15%	$715	$137	5
MH Therapy & Counseling	90804- 90857	Encounter	605	5,745	$680,093	12.60%	$1,124	$118	9
Nursing Home MH Monitoring	T1017	15 Minutes	18	512	$26,153	0.48%	$1,453	$51	28
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$154	0.00%	$154	$154	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	4	711	$46,904	0.87%	$11,726	$66	178

Livingston

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	8	8,223	$26,215	0.49%	$3,277	$3	1,028
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	36	19,350	$256,001	4.74%	$7,111	$13	538
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	1	$298	0.01%	$298	$298	1
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	11	4,492	$25,927	0.48%	$2,357	$6	408
Supports Coordination	T1016	15 Minutes	1	5	$462	0.01%	$462	$92	5
Targeted Case Mangement	T1017	15 Minutes	465	17,497	$893,747	16.55%	$1,922	$51	38
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	192	214	$27,781	0.51%	$145	$130	1
Setting Total:					$5,399,514	100.00%	$1,580		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		1,007			$5,399,514	100.00%			

Macomb

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	217	22,183	$1,543,937	3.40%	$7,115	$70	102
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	4,179	7,003	$2,475,372	5.46%	$592	$353	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	115	538	$36,824	0.08%	$320	$68	5
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	15	48	$9,300	0.02%	$620	$194	3
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	230	302,934	$990,594	2.18%	$4,307	$3	1,317
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	375	4,083	$1,819,916	4.01%	$4,853	$446	11
Community Living Supports	H2015	15 Minutes	16	23,475	$97,656	0.22%	$6,104	$4	1,467
Community Living Supports	H2016	Days	340	50,709	$4,162,743	9.18%	$12,243	$82	149
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	448	2,210	$158,892	0.35%	$355	$72	5
Crisis Residential	H0018	Days	163	1,709	$448,385	0.99%	$2,751	$262	10
Electroconvulsive Therapy	90870, 0901 rev	Encounter	40	290	$119,480	0.26%	$2,987	$412	7
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	22	61	$8,286	0.02%	$377	$136	3
Health Services	97802, 97803, H0034, T1002	15 Minutes	1,300	8,566	$764,293	1.69%	$588	$89	7
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	15	81	$19,614	0.04%	$1,308	$242	5
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	44	11,517	$5,231,669	11.54%	$118,902	$454	262
Inpatient Psychiatric Services in Private IMD	0100	Days	883	18,402	$8,202,323	18.09%	$9,289	$446	21
Intensive Crisis Stabilization	S9484	Hour	137	1,091	$134,087	0.30%	$979	$123	8
Medication Administration	90782, 90788, 99506	Encounter	220	1,646	$141,398	0.31%	$643	$86	7
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	2,583	12,657	$1,624,752	3.58%	$629	$128	5
MH Therapy & Counseling	90804- 90857	Encounter	1,782	13,965	$2,266,855	5.00%	$1,272	$162	8
Nursing Home MH Monitoring	T1017	15 Minutes	69	356	$28,953	0.06%	$420	$81	5
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	263	2,355	$569,274	1.26%	$2,165	$242	9
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$126,776	0.28%	$0	$0	0
Personal care in Spec Res	T1020	Days	327	48,234	$2,820,737	6.22%	$8,626	$58	148

Macomb

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	4	32	$1,131	0.00%	$283	$35	8
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	2	611	$1,130	0.00%	$565	$2	306
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	5	266	$683	0.00%	$137	$3	53
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	9	2,329	$5,658	0.01%	$629	$2	259
Supports Coordination	T1016	15 Minutes	2	7	$632	0.00%	$316	$90	4
Targeted Case Mangement	T1017	15 Minutes	2,010	30,802	$2,507,625	5.53%	$1,248	$81	15
Transportation	T2003, T2004, T 2005	Encounter/Trip	29	1,906	$18,893	0.04%	$651	$10	66
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	2,953	5,136	$1,486,557	3.28%	$503	$289	2
Setting Total:					$37,824,425	83.41%	$2,012		
Day Program Setting	S5100	15 Minutes	26	27,633	$65,490	0.14%	$2,519	$2	1,063
Specialized Residential Setting	S5140, S5145	Days	329	50,855	$6,345,529	13.99%	$19,287	$125	155
Supported Independent Housing Setting	H0043	Days	71	18,646	$1,113,327	2.46%	$15,681	$60	263
Setting Total:					$7,524,346	16.59%	$17,663		
Total Population and Cost		5,680			$45,348,771	100.00%			

Manistee-Benzie

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	83	16,058	$645,146	18.68%	$7,773	$40	193
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	458	650	$276,569	8.01%	$604	$425	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	1	3	$273	0.01%	$273	$91	3
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	43	87,416	$307,560	8.91%	$7,153	$4	2,033
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	58	411	$193,617	5.61%	$3,338	$471	7
Community Living Supports	H2015	15 Minutes	6	1,018	$8,741	0.25%	$1,457	$9	170
Community Living Supports	H2016	Days	0	0	$0	0.00%	$0	$0	0
Community Living Supports	T2036, T2037	Session	20	39	$23,993	0.69%	$1,200	$615	2
Crisis Intervention	H2011	15 Minutes	120	349	$36,252	1.05%	$302	$104	3
Crisis Residential	H0018	Days	19	120	$31,314	0.91%	$1,648	$261	6
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	3	3	$733	0.02%	$244	$244	1
Health Services	97802, 97803, H0034, T1002	15 Minutes	2	3	$195	0.01%	$98	$65	2
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	575	$246,920	7.15%	$49,384	$429	115
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	120	146	$65,496	1.90%	$546	$449	1
Medication Administration	90782, 90788, 99506	Encounter	9	31	$2,438	0.07%	$271	$79	3
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	314	1,339	$217,097	6.29%	$691	$162	4
MH Therapy & Counseling	90804- 90857	Encounter	605	5,205	$560,852	16.24%	$927	$108	9
Nursing Home MH Monitoring	T1017	15 Minutes	51	1,257	$32,377	0.94%	$635	$26	25
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	61	0	$46,536	1.35%	$763	$0	0
Personal care in Spec Res	T1020	Days	0	0	$0	0.00%	$0	$0	0

Manistee-Benzie

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	27	855	$163,400	4.73%	$6,052	$191	32
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	16	3,139	$21,093	0.61%	$1,318	$7	196
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	77	17,587	$202,895	5.87%	$2,635	$12	228
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	201	10,413	$278,376	8.06%	$1,385	$27	52
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	615	981	$22,760	0.66%	$37	$23	2
Setting Total:					$3,384,633	98.00%	$1,162		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	1	366	$68,915	2.00%	$68,915	$188	366
Setting Total:					$68,915	2.00%	$68,915		
Total Population and Cost		1,086			$3,453,548	100.00%			

Monroe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	84	13,611	$469,275	9.28%	$5,587	$34	162
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,196	2,545	$515,855	10.20%	$431	$203	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	1	3	$230	0.00%	$230	$77	3
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	5	7	$1,344	0.03%	$269	$192	1
Behavior Management Review	H2000	Encounter	7	12	$1,837	0.04%	$262	$153	2
Clubhouse Program	H2030	15 Minutes	71	75,728	$220,863	4.37%	$3,111	$3	1,067
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	175	1,151	$556,146	11.00%	$3,178	$483	7
Community Living Supports	H2015	15 Minutes	146	178,281	$520,889	10.30%	$3,568	$3	1,221
Community Living Supports	H2016	Days	16	1,973	$246,466	4.87%	$15,404	$125	123
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	263	1,144	$73,092	1.45%	$278	$64	4
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	3	5	$740	0.01%	$247	$148	2
Health Services	97802, 97803, H0034, T1002	15 Minutes	49	1,966	$150,798	2.98%	$3,078	$77	40
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	644	$260,720	5.16%	$52,144	$405	129
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	79	1,078	$100,478	1.99%	$1,272	$93	14
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	850	3,809	$532,661	10.53%	$627	$140	4
MH Therapy & Counseling	90804- 90857	Encounter	444	3,152	$318,985	6.31%	$718	$101	7
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	2	4	$924	0.02%	$462	$231	2
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	13	1,217	$52,408	1.04%	$4,031	$43	94

Monroe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	5	1,889	$8,192	0.16%	$1,638	$4	378
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	5	3,516	$8,623	0.17%	$1,725	$2	703
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	186	11,042	$59,047	1.17%	$317	$5	59
Supports Coordination	T1016	15 Minutes	2	14	$616	0.01%	$308	$44	7
Targeted Case Mangement	T1017	15 Minutes	689	21,751	$861,136	17.03%	$1,250	$40	32
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	230	266	$41,125	0.81%	$179	$155	1
Setting Total:					$5,002,448	98.92%	$1,105		
Day Program Setting	S5100	15 Minutes	16	14,194	$44,301	0.88%	$2,769	$3	887
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	8	1,137	$10,428	0.21%	$1,303	$9	142
Setting Total:					$54,729	1.08%	$2,280		
Total Population and Cost		1,597			$5,057,177	100.00%			

Montcalm

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	978	779	$200,301	11.02%	$205	$257	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	13	160	$11,334	0.62%	$872	$71	12
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	9	79	$9,875	0.54%	$1,097	$125	9
Behavior Management Review	H2000	Encounter	1	4	$782	0.04%	$782	$196	4
Clubhouse Program	H2030	15 Minutes	42	57,485	$277,653	15.28%	$6,611	$5	1,369
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	57	432	$177,803	9.78%	$3,119	$412	8
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	5	1,602	$40,210	2.21%	$8,042	$25	320
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	238	1,075	$45,010	2.48%	$189	$42	5
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	9	430	$233,102	12.83%	$25,900	$542	48
Inpatient Psychiatric Services in Private IMD	0100	Days	5	39	$20,798	1.14%	$4,160	$533	8
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	0	0	$0	0.00%	$0	$0	0
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	173	781	$81,739	4.50%	$472	$105	5
MH Therapy & Counseling	90804- 90857	Encounter	429	1,855	$236,435	13.01%	$551	$127	4
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	47	469,248	$47,961	2.64%	$1,020	$0	9,984
Personal care in Spec Res	T1020	Days	9	1,237	$31,049	1.71%	$3,450	$25	137

Montcalm

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	124	267	$59,464	3.27%	$480	$223	2
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	2	3,085	$5,954	0.33%	$2,977	$2	1,543
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	7	10,120	$23,453	1.29%	$3,350	$2	1,446
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	123	2,218	$228,855	12.59%	$1,861	$103	18
Transportation	T2003, T2004, T 2005	Encounter/Trip	42	3,332	$72,726	4.00%	$1,732	$22	79
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	365	370	$12,932	0.71%	$35	$35	1
Setting Total:					$1,817,436	100.00%	$679		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		978			$1,817,436	100.00%			

Muskegon

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	507	26,011	$1,308,354	10.20%	$2,581	$50	51
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,550	1,753	$498,322	3.89%	$321	$284	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	42	87	$17,588	0.14%	$419	$202	2
Behavior Management Review	H2000	Encounter	33	84	$2,303	0.02%	$70	$27	3
Clubhouse Program	H2030	15 Minutes	138	98,422	$339,556	2.65%	$2,461	$3	713
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	170	2,003	$708,020	5.52%	$4,165	$353	12
Community Living Supports	H2015	15 Minutes	8	6,819	$25,571	0.20%	$3,196	$4	852
Community Living Supports	H2016	Days	341	15,759	$2,435,431	18.99%	$7,142	$155	46
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	825	4,378	$254,887	1.99%	$309	$58	5
Crisis Residential	H0018	Days	20	92	$22,339	0.17%	$1,117	$243	5
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	435	1,427	$179,859	1.40%	$413	$126	3
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	1,877	8,983	$660,340	5.15%	$352	$74	5
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	34	39	$22,587	0.18%	$664	$579	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	34	2,049	$621,277	4.84%	$18,273	$303	60
Inpatient Psychiatric Services in Private IMD	0100	Days	5	38	$14,201	0.11%	$2,840	$374	8
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	61	508	$9,357	0.07%	$153	$18	8
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,396	4,492	$559,470	4.36%	$401	$125	3
MH Therapy & Counseling	90804- 90857	Encounter	1,494	6,632	$911,444	7.11%	$610	$137	4
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	9	217	$17,094	0.13%	$1,899	$79	24
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	70	262	$3,382	0.03%	$48	$13	4
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	196	0	$65,030	0.51%	$332	$0	0
Personal care in Spec Res	T1020	Days	241	13,851	$554,884	4.33%	$2,302	$40	57

Muskegon

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	1	6	$187	0.00%	$187	$31	6
Respite Care	T1005, S5150	15 Minutes	1	1	$1	0.00%	$1	$1	1
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	15	10,434	$26,502	0.21%	$1,767	$3	696
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	32	10,547	$11,180	0.09%	$349	$1	330
Supports Coordination	T1016	15 Minutes	377	1,859	$154,353	1.20%	$409	$83	5
Targeted Case Mangement	T1017	15 Minutes	981	30,878	$2,779,603	21.68%	$2,833	$90	31
Transportation	T2003, T2004, T 2005	Encounter/Trip	8	615	$3,935	0.03%	$492	$6	77
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	108	1,290	$107,780	0.84%	$998	$84	12
Setting Total:					$12,314,839	96.03%	$1,119		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	68	2,627	$508,613	3.97%	$7,480	$194	39
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$508,613	3.97%	$7,480		
Total Population and Cost		2,738			$12,823,452	100.00%			

Newaygo

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	64	5,662	$340,700	13.91%	$5,323	$60	88
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	663	1,475	$187,385	7.65%	$283	$127	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	22	92	$13,139	0.54%	$597	$143	4
Behavior Management Review	H2000	Encounter	1	1	$57	0.00%	$57	$57	1
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	72	635	$339,370	13.86%	$4,713	$534	9
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	4	968	$32,911	1.34%	$8,228	$34	242
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	144	447	$46,766	1.91%	$325	$105	3
Crisis Residential	H0018	Days	41	248	$63,595	2.60%	$1,551	$256	6
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	325	1,754	$69,505	2.84%	$214	$40	5
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	8	9	$7,294	0.30%	$912	$810	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	1	312	$14,882	0.61%	$14,882	$48	312
Inpatient Psychiatric Services in Private IMD	0100	Days	10	54	$31,980	1.31%	$3,198	$592	5
Intensive Crisis Stabilization	S9484	Hour	44	54	$16,477	0.67%	$374	$305	1
Medication Administration	90782, 90788, 99506	Encounter	0	0	$0	0.00%	$0	$0	0
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	275	1,388	$93,833	3.83%	$341	$68	5
MH Therapy & Counseling	90804- 90857	Encounter	404	2,761	$323,154	13.19%	$800	$117	7
Nursing Home MH Monitoring	T1017	15 Minutes	7	183	$9,928	0.41%	$1,418	$54	26
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	79	0	$90,100	3.68%	$1,141	$0	0
Personal care in Spec Res	T1020	Days	4	969	$6,321	0.26%	$1,580	$7	242

Newaygo

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	17	22	$2,989	0.12%	$176	$136	1
Respite Care	T1005, S5150	15 Minutes	32	20,320	$31,697	1.29%	$991	$2	635
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	19	15,913	$77,134	3.15%	$4,060	$5	838
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	204	10,706	$580,847	23.72%	$2,847	$54	52
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	389	434	$69,144	2.82%	$178	$159	1
Setting Total:					$2,449,207	100.00%	$866		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		945			$2,449,207	100.00%			

North Country

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	91	16,913	$750,113	9.48%	$8,243	$44	186
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,718	2,406	$441,274	5.58%	$257	$183	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	3	5	$144	0.00%	$48	$29	2
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	18	38	$6,647	0.08%	$369	$175	2
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	204	220,502	$726,060	9.18%	$3,559	$3	1,081
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	420	3,568	$1,487,346	18.80%	$3,541	$417	8
Community Living Supports	H2015	15 Minutes	15	13,551	$40,995	0.52%	$2,733	$3	903
Community Living Supports	H2016	Days	89	3,856	$725,389	9.17%	$8,150	$188	43
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	574	3,047	$94,427	1.19%	$165	$31	5
Crisis Residential	H0018	Days	88	614	$284,607	3.60%	$3,234	$464	7
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	1	1	$22	0.00%	$22	$22	1
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	113	703	$95,327	1.21%	$844	$136	6
Health Services	97802, 97803, H0034, T1002	15 Minutes	291	981	$39,574	0.50%	$136	$40	3
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	2	2	$1,357	0.02%	$679	$679	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	22	983	$567,422	7.17%	$25,792	$577	45
Inpatient Psychiatric Services in Private IMD	0100	Days	19	232	$73,656	0.93%	$3,877	$317	12
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	60	738	$44,568	0.56%	$743	$60	12
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	835	4,210	$334,400	4.23%	$400	$79	5
MH Therapy & Counseling	90804- 90857	Encounter	1,014	6,356	$729,405	9.22%	$719	$115	6
Nursing Home MH Monitoring	T1017	15 Minutes	60	1,691	$51,292	0.65%	$855	$30	28
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	1	5	$1,750	0.02%	$1,750	$350	5
Peer-directed/operated Svs	H0038	15 Minutes	123	0	$104,200	1.32%	$847	$0	0
Personal care in Spec Res	T1020	Days	89	3,856	$34,539	0.44%	$388	$9	43

North Country

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	1	19	$3,080	0.04%	$3,080	$162	19
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	4	523	$1,406	0.02%	$352	$3	131
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	42	3,209	$25,600	0.32%	$610	$8	76
Supports Coordination	T1016	15 Minutes	8	49	$3,778	0.05%	$472	$77	6
Targeted Case Mangement	T1017	15 Minutes	379	21,358	$869,068	10.99%	$2,293	$41	56
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	1,110	1,420	$216,776	2.74%	$195	$153	1
Setting Total:					$7,754,222	98.02%	$1,049		
Day Program Setting	S5100	15 Minutes	16	36,052	$96,952	1.23%	$6,060	$3	2,253
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	5	370	$59,508	0.75%	$11,902	$161	74
Setting Total:					$156,460	1.98%	$7,450		
Total Population and Cost		2,762			$7,910,682	100.00%			

Northeast Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	65	7,429	$356,871	8.56%	$5,490	$48	114
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,061	1,742	$304,160	7.30%	$287	$175	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	10	32	$2,847	0.07%	$285	$89	3
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	55	41,754	$261,949	6.29%	$4,763	$6	759
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	52	231	$181,464	4.35%	$3,490	$786	4
Community Living Supports	H2015	15 Minutes	81	7,511	$200,253	4.81%	$2,472	$27	93
Community Living Supports	H2016	Days	70	4,123	$721,074	17.30%	$10,301	$175	59
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	237	1,186	$32,082	0.77%	$135	$27	5
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	691	1,626	$45,087	1.08%	$65	$28	2
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	11	1,762	$955,639	22.93%	$86,876	$542	160
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	36	256	$11,374	0.27%	$316	$44	7
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	915	2,984	$418,355	10.04%	$457	$140	3
MH Therapy & Counseling	90804- 90857	Encounter	332	2,156	$186,532	4.48%	$562	$87	6
Nursing Home MH Monitoring	T1017	15 Minutes	37	1,376	$43,053	1.03%	$1,164	$31	37
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	481	$17,728	0.43%	$17,728	$37	481
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	5	$182	0.00%	$182	$36	5
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	66	0	$24,210	0.58%	$367	$0	0
Personal care in Spec Res	T1020	Days	52	3,408	$23,086	0.55%	$444	$7	66

Northeast Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	88	$12,629	0.30%	$12,629	$144	88
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	5	110	$2,697	0.06%	$539	$25	22
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	262	8,903	$254,806	6.11%	$973	$29	34
Transportation	T2003, T2004, T 2005	Encounter/Trip	2	245	$3,476	0.08%	$1,738	$14	123
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	1	69	$31	0.00%	$31	$0	69
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	665	950	$67,856	1.63%	$102	$71	1
Setting Total:					$4,127,438	99.05%	$876		
Day Program Setting	S5100	15 Minutes	2	6,187	$22,276	0.53%	$11,138	$4	3,094
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	1	36	$17,221	0.41%	$17,221	$478	36
Setting Total:					$39,497	0.95%	$13,166		
Total Population and Cost		1,511			$4,166,935	100.00%			

Northern Lakes

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	168	18,545	$881,581	6.92%	$5,248	$48	110
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	2,369	4,410	$938,268	7.36%	$396	$213	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	79	772	$19,473	0.15%	$246	$25	10
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	13	39	$6,015	0.05%	$463	$154	3
Behavior Management Review	H2000	Encounter	10	35	$8,149	0.06%	$815	$233	4
Clubhouse Program	H2030	15 Minutes	186	232,336	$676,203	5.30%	$3,636	$3	1,249
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	390	3,928	$1,676,730	13.15%	$4,299	$427	10
Community Living Supports	H2015	15 Minutes	232	12,501	$63,066	0.49%	$272	$5	54
Community Living Supports	H2016	Days	112	16,376	$1,301,795	10.21%	$11,623	$79	146
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	936	6,833	$258,532	2.03%	$276	$38	7
Crisis Residential	H0018	Days	118	1,907	$514,321	4.03%	$4,359	$270	16
Electroconvulsive Therapy	90870, 0901 rev	Encounter	5	64	$20,111	0.16%	$4,022	$314	13
Electroconvulsive Therapy	00104	Minutes	2	480	$1,695	0.01%	$848	$4	240
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	1	1	$9	0.00%	$9	$9	1
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	10	16	$2,173	0.02%	$217	$136	2
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	24	167	$5,996	0.05%	$250	$36	7
Health Services	97804	30 Minutes	531	1,930	$74,896	0.59%	$141	$39	4
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	21	1,501	$698,974	5.48%	$33,284	$466	71
Inpatient Psychiatric Services in Private IMD	0100	Days	70	790	$337,224	2.65%	$4,817	$427	11
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	100	1,257	$48,779	0.38%	$488	$39	13
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,423	6,753	$565,035	4.43%	$397	$84	5
MH Therapy & Counseling	90804- 90857	Encounter	1,919	13,081	$1,191,670	9.35%	$621	$91	7
Nursing Home MH Monitoring	T1017	15 Minutes	143	4,764	$231,090	1.81%	$1,616	$49	33
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	4	$291	0.00%	$291	$73	4
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	3	4	$776	0.01%	$259	$194	1
Partial Hospitalization	Rev 0912, 0913	Days	35	253	$83,452	0.65%	$2,384	$330	7
Peer-directed/operated Svs	H0038	15 Minutes	120	28,454	$59,350	0.47%	$495	$2	237
Personal care in Spec Res	T1020	Days	50	11,461	$466,296	3.66%	$9,326	$41	229

Northern Lakes

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	14	67	$1,560	0.01%	$111	$23	5
Respite Care	T1005, S5150	15 Minutes	10	7,727	$10,495	0.08%	$1,050	$1	773
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	199	37,012	$170,559	1.34%	$857	$5	186
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	1	$141	0.00%	$141	$141	1
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	57	53,853	$248,166	1.95%	$4,354	$5	945
Supports Coordination	T1016	15 Minutes	15	49	$2,377	0.02%	$158	$49	3
Targeted Case Mangement	T1017	15 Minutes	940	23,248	$1,127,703	8.85%	$1,200	$49	25
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	1,621	2,627	$407,774	3.20%	$252	$155	2
Setting Total:					$12,100,725	94.93%	$1,014		
Day Program Setting	S5100	15 Minutes	20	12,655	$44,198	0.35%	$2,210	$3	633
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	37	8,169	$602,312	4.73%	$16,279	$74	221
Setting Total:					$646,510	5.07%	$11,342		
Total Population and Cost		3,641			$12,747,235	100.00%			

Northpointe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	49	4,860	$461,837	9.43%	$9,425	$95	99
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	784	1,206	$232,232	4.74%	$296	$193	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	23	65	$1,219	0.02%	$53	$19	3
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	4	13	$1,979	0.04%	$495	$152	3
Behavior Management Review	H2000	Encounter	1	3	$450	0.01%	$450	$150	3
Clubhouse Program	H2030	15 Minutes	41	8,498	$13,767	0.28%	$336	$2	207
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	130	715	$496,646	10.14%	$3,820	$695	6
Community Living Supports	H2015	15 Minutes	96	111,240	$553,975	11.31%	$5,771	$5	1,159
Community Living Supports	H2016	Days	31	4,006	$848,960	17.34%	$27,386	$212	129
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	201	881	$48,455	0.99%	$241	$55	4
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	96	357	$8,461	0.17%	$88	$24	4
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	813	$353,655	7.22%	$70,731	$435	163
Inpatient Psychiatric Services in Private IMD	0100	Days	22	119	$74,381	1.52%	$3,381	$625	5
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	13	158	$8,319	0.17%	$640	$53	12
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	395	2,181	$272,625	5.57%	$690	$125	6
MH Therapy & Counseling	90804- 90857	Encounter	316	2,354	$282,480	5.77%	$894	$120	7
Nursing Home MH Monitoring	T1017	15 Minutes	16	90	$5,400	0.11%	$338	$60	6
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	1	$45	0.00%	$45	$45	1
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	15	18	$4,950	0.10%	$330	$275	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	54	266	$12,566	0.26%	$233	$47	5
Personal care in Spec Res	T1020	Days	26	2,461	$61,345	1.25%	$2,359	$25	95

Northpointe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	4	2,254	$3,592	0.07%	$898	$2	564
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	24	44,067	$115,866	2.37%	$4,828	$3	1,836
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	1	$200	0.00%	$200	$200	1
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	34	58,541	$248,214	5.07%	$7,300	$4	1,722
Supports Coordination	T1016	15 Minutes	6	28	$2,100	0.04%	$350	$75	5
Targeted Case Mangement	T1017	15 Minutes	392	9,783	$586,980	11.99%	$1,497	$60	25
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	327	499	$86,080	1.76%	$263	$173	2
Setting Total:					$4,786,779	97.74%	$1,541		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	4	578	$110,527	2.26%	$27,632	$191	145
Setting Total:					$110,527	2.26%	$27,632		
Total Population and Cost		1,064			$4,897,306	100.00%			

Oakland

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	563	77,325	$4,644,107	7.05%	$8,249	$60	137
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	5,488	9,048	$3,190,839	4.85%	$581	$353	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	1	6	$1,145	0.00%	$1,145	$191	6
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	5	16	$3,612	0.01%	$722	$226	3
Behavior Management Review	H2000	Encounter	6	8	$858	0.00%	$143	$107	1
Clubhouse Program	H2030	15 Minutes	397	551,522	$1,615,959	2.45%	$4,070	$3	1,389
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	821	9,189	$3,660,933	5.56%	$4,459	$398	11
Community Living Supports	H2015	15 Minutes	3	8,900	$33,909	0.05%	$11,303	$4	2,967
Community Living Supports	H2016	Days	264	70,576	$8,168,043	12.40%	$30,940	$116	267
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	1,853	44,674	$2,826,077	4.29%	$1,525	$63	24
Crisis Residential	H0018	Days	391	4,484	$1,296,549	1.97%	$3,316	$289	11
Electroconvulsive Therapy	90870, 0901 rev	Encounter	17	314	$56,050	0.09%	$3,297	$179	18
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	15	15	$2,912	0.00%	$194	$194	1
Health Services	S9445, S9446, S9470	Encounter	1,218	6,736	$575,519	0.87%	$473	$85	6
Health Services	97802, 97803, H0034, T1002	15 Minutes	684	4,700	$541,930	0.82%	$792	$115	7
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	567	2,007	$1,142,706	1.74%	$2,015	$569	4
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	73	18,281	$5,855,016	8.89%	$80,206	$320	250
Inpatient Psychiatric Services in Private IMD	0100	Days	612	7,094	$2,797,548	4.25%	$4,571	$394	12
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	419	3,080	$171,306	0.26%	$409	$56	7
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	4,889	23,026	$1,659,765	2.52%	$339	$72	5
MH Therapy & Counseling	90804- 90857	Encounter	1,420	13,304	$735,748	1.12%	$518	$55	9
Nursing Home MH Monitoring	T1017	15 Minutes	312	5,258	$296,867	0.45%	$951	$56	17
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	101	2,556	$115,752	0.18%	$1,146	$45	25
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	185	1,030	$73,137	0.11%	$395	$71	6
Partial Hospitalization	Rev 0912, 0913	Days	78	826	$108,241	0.16%	$1,388	$131	11
Peer-directed/operated Svs	H0038	15 Minutes	1,463	0	$617,825	0.94%	$422	$0	0
Personal care in Spec Res	T1020	Days	264	70,576	$2,970,643	4.51%	$11,252	$42	267

Oakland

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	5	7	$285	0.00%	$57	$41	1
Respite Care	T1005, S5150	15 Minutes	1	384	$1,083	0.00%	$1,083	$3	384
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	1,047	217,703	$831,625	1.26%	$794	$4	208
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	42	25,694	$165,469	0.25%	$3,940	$6	612
Supports Coordination	T1016	15 Minutes	4	38	$2,289	0.00%	$572	$60	10
Targeted Case Mangement	T1017	15 Minutes	4,430	190,715	$12,112,309	18.39%	$2,734	$64	43
Transportation	T2003, T2004, T 2005	Encounter/Trip	693	826	$84,483	0.13%	$122	$102	1
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	775	1,276	$915,875	1.39%	$1,182	$718	2
Setting Total:					$57,276,414	86.97%	$1,968		
Day Program Setting	S5100	15 Minutes	94	98,130	$455,323	0.69%	$4,844	$5	1,044
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	265	73,973	$8,125,934	12.34%	$30,664	$110	279
Setting Total:					$8,581,257	13.03%	$23,903		
Total Population and Cost		8,302			$65,857,671	100.00%			

Ottawa

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	112	12,454	$597,792	8.59%	$5,337	$48	111
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,048	1,539	$801,402	11.52%	$765	$521	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	8	8	$4,282	0.06%	$535	$535	1
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	115	159,703	$469,527	6.75%	$4,083	$3	1,389
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	165	1,477	$766,685	11.02%	$4,647	$519	9
Community Living Supports	H2015	15 Minutes	55	8,459	$30,875	0.44%	$561	$4	154
Community Living Supports	H2016	Days	120	4,498	$533,418	7.67%	$4,445	$119	37
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	569	5,096	$425,975	6.12%	$749	$84	9
Crisis Residential	H0018	Days	23	105	$24,333	0.35%	$1,058	$232	5
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	70	196	$20,560	0.30%	$294	$105	3
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	81	308	$160,323	2.30%	$1,979	$521	4
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	11	1,169	$722,890	10.39%	$65,717	$618	106
Inpatient Psychiatric Services in Private IMD	0100	Days	6	28	$14,013	0.20%	$2,336	$500	5
Intensive Crisis Stabilization	S9484	Hour	1	2	$610	0.01%	$610	$305	2
Medication Administration	90782, 90788, 99506	Encounter	32	338	$18,735	0.27%	$585	$55	11
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,018	4,533	$806,443	11.59%	$792	$178	4
MH Therapy & Counseling	90804- 90857	Encounter	718	8,291	$711,585	10.23%	$991	$86	12
Nursing Home MH Monitoring	T1017	15 Minutes	18	133	$9,572	0.14%	$532	$72	7
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	2	11	$3,654	0.05%	$1,827	$332	6
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	79	3,146	$128,923	1.85%	$1,632	$41	40

Ottawa

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	11	36	$6,963	0.10%	$633	$193	3
Respite Care	T1005, S5150	15 Minutes	17	2,322	$2,043	0.03%	$120	$1	137
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	2	1,340	$4,315	0.06%	$2,157	$3	670
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	19	5,989	$32,580	0.47%	$1,715	$5	315
Supports Coordination	T1016	15 Minutes	2	48	$6,911	0.10%	$3,455	$144	24
Targeted Case Mangement	T1017	15 Minutes	294	5,591	$392,821	5.65%	$1,336	$70	19
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	577	913	$260,999	3.75%	$452	$286	2
Setting Total:					$6,958,228	100.00%	$1,345		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		1,885			$6,958,228	100.00%			

Pathways

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	102	19,596	$1,654,882	17.72%	$16,224	$84	192
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,449	2,299	$542,721	5.81%	$375	$236	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	9	102	$2,075	0.02%	$231	$20	11
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	11	18	$4,299	0.05%	$391	$239	2
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	169	1,757	$1,068,256	11.44%	$6,321	$608	10
Community Living Supports	H2015	15 Minutes	246	19,217	$120,875	1.29%	$491	$6	78
Community Living Supports	H2016	Days	50	8,171	$1,089,266	11.66%	$21,785	$133	163
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	984	10,454	$1,708,915	18.30%	$1,737	$163	11
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	1	1	$100	0.00%	$100	$100	1
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	1	194	$8,035	0.09%	$8,035	$41	194
Health Services	S9445, S9446, S9470	Encounter	18	87	$8,525	0.09%	$474	$98	5
Health Services	97802, 97803, H0034, T1002	15 Minutes	161	726	$23,448	0.25%	$146	$32	5
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	7	1,273	$473,903	5.07%	$67,700	$372	182
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	53	809	$30,653	0.33%	$578	$38	15
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	608	3,472	$380,283	4.07%	$625	$110	6
MH Therapy & Counseling	90804- 90857	Encounter	567	3,943	$466,153	4.99%	$822	$118	7
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	2	29	$1,953	0.02%	$976	$67	15
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	7	20	$1,347	0.01%	$192	$67	3
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	17	628	$7,724	0.08%	$454	$12	37
Personal care in Spec Res	T1020	Days	46	7,020	$114,029	1.22%	$2,479	$16	153

Pathways

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	96	275	$15,021	0.16%	$156	$55	3
Respite Care	T1005, S5150	15 Minutes	4	564	$710	0.01%	$177	$1	141
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	123	28,950	$122,748	1.31%	$998	$4	235
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	6	$830	0.01%	$830	$138	6
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	131	58,176	$277,500	2.97%	$2,118	$5	444
Supports Coordination	T1016	15 Minutes	27	934	$37,780	0.40%	$1,399	$40	35
Targeted Case Mangement	T1017	15 Minutes	606	26,350	$931,736	9.98%	$1,538	$35	43
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	492	564	$200,248	2.14%	$407	$355	1
Setting Total:					$9,294,016	99.52%	$1,552		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	4	254	$45,164	0.48%	$11,291	$178	64
Setting Total:					$45,164	0.48%	$11,291		
Total Population and Cost		5,992			$9,339,180	100.00%			

Pines

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	51	10,736	$350,355	15.31%	$6,870	$33	211
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	745	1,287	$187,891	8.21%	$252	$146	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	0	0	$0	0.00%	$0	$0	0
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	17	67,971	$151,857	6.64%	$8,933	$2	3,998
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	80	395	$200,574	8.77%	$2,507	$508	5
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	5	760	$61,310	2.68%	$12,262	$81	152
Community Living Supports	T2036, T2037	Session	85	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	1	445	$15,261	0.67%	$15,261	$34	445
Crisis Residential	H0018	Days	1	15	$3,824	0.17%	$3,824	$255	15
Electroconvulsive Therapy	90870, 0901 rev	Encounter	1	4	$267	0.01%	$267	$67	4
Electroconvulsive Therapy	00104	Minutes	1	387	$73	0.00%	$73	$0	387
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	1	1	$134	0.01%	$134	$134	1
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	396	978	$39,877	1.74%	$101	$41	2
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	4	157	$61,858	2.70%	$15,465	$394	39
Inpatient Psychiatric Services in Private IMD	0100	Days	2	13	$20,254	0.89%	$10,127	$1,558	7
Intensive Crisis Stabilization	S9484	Hour	89	107	$20,493	0.90%	$230	$192	1
Medication Administration	90782, 90788, 99506	Encounter	22	284	$11,431	0.50%	$520	$40	13
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	380	1,266	$121,258	5.30%	$319	$96	3
MH Therapy & Counseling	90804- 90857	Encounter	719	4,983	$520,128	22.73%	$723	$104	7
Nursing Home MH Monitoring	T1017	15 Minutes	8	206	$1,689	0.07%	$211	$8	26
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	55	0	$52,720	2.30%	$959	$0	0
Personal care in Spec Res	T1020	Days	5	760	$6,115	0.27%	$1,223	$8	152

Pines

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	33	25,436	$91,569	4.00%	$2,775	$4	771
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	17	1,120	$16,922	0.74%	$995	$15	66
Supports Coordination	T1016	15 Minutes	12	304	$12,236	0.53%	$1,020	$40	25
Targeted Case Mangement	T1017	15 Minutes	124	5,617	$224,871	9.83%	$1,813	$40	45
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	163	170	$9,067	0.40%	$56	$53	1
Setting Total:					$2,182,034	95.38%	$723		
Day Program Setting	S5100	15 Minutes	3	11,992	$26,311	1.15%	$8,770	$2	3,997
Specialized Residential Setting	S5140, S5145	Days	4	737	$79,495	3.47%	$19,874	$108	184
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$105,806	4.62%	$15,115		
Total Population and Cost		1,218			$2,287,840	100.00%			

Saginaw

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	92	17,834	$481,161	2.99%	$5,230	$27	194
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	2,169	6,570	$1,162,059	7.21%	$536	$177	3
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	10	12	$1,264	0.01%	$126	$105	1
Behavior Management Review	H2000	Encounter	13	26	$2,496	0.02%	$192	$96	2
Clubhouse Program	H2030	15 Minutes	83	128,281	$234,755	1.46%	$2,828	$2	1,546
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	555	4,961	$3,085,284	19.15%	$5,559	$622	9
Community Living Supports	H2015	15 Minutes	6	1,600	$6,032	0.04%	$1,005	$4	267
Community Living Supports	H2016	Days	124	28,529	$1,324,887	8.22%	$10,685	$46	230
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	1,532	13,099	$720,445	4.47%	$470	$55	9
Crisis Residential	H0018	Days	198	1,147	$472,059	2.93%	$2,384	$412	6
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	30	0	$17,731	0.11%	$591	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	836	10,622	$164,959	1.02%	$197	$16	13
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	205	287	$6,062	0.04%	$30	$21	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	68	9,363	$3,955,680	24.55%	$58,172	$422	138
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	173	2,175	$78,300	0.49%	$453	$36	13
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,245	5,867	$380,768	2.36%	$306	$65	5
MH Therapy & Counseling	90804- 90857	Encounter	598	5,629	$819,864	5.09%	$1,371	$146	9
Nursing Home MH Monitoring	T1017	15 Minutes	70	2,162	$85,507	0.53%	$1,222	$40	31
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	2	38	$1,040	0.01%	$520	$27	19
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	7	11	$1,406	0.01%	$201	$128	2
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	126	30,141	$1,446,768	8.98%	$11,482	$48	239

Saginaw

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	4	10	$1,816	0.01%	$454	$182	3
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	6	10,688	$48,096	0.30%	$8,016	$5	1,781
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	1	6	$730	0.00%	$730	$122	6
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	2	5,907	$9,038	0.06%	$4,519	$2	2,954
Supports Coordination	T1016	15 Minutes	14	355	$23,419	0.15%	$1,673	$66	25
Targeted Case Mangement	T1017	15 Minutes	782	33,437	$1,322,434	8.21%	$1,691	$40	43
Transportation	T2003, T2004, T 2005	Encounter/Trip	241	503	$17,211	0.11%	$71	$34	2
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	233	419	$1,467	0.01%	$6	$4	2
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	72	213	$9,585	0.06%	$133	$45	3
Setting Total:					$15,882,323	98.58%	$1,672		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	18	3,058	$229,411	1.42%	$12,745	$75	170
Setting Total:					$229,411	1.42%	$12,745		
Total Population and Cost		3,234			$16,111,734	100.00%			

Sanilac

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	63	9,695	$634,780	18.53%	$10,076	$65	154
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	281	420	$142,521	4.16%	$507	$339	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	11	25	$2,969	0.09%	$270	$119	2
Behavior Management Review	H2000	Encounter	1	1	$27	0.00%	$27	$27	1
Clubhouse Program	H2030	15 Minutes	20	15,939	$129,338	3.78%	$6,467	$8	797
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	46	250	$167,701	4.90%	$3,646	$671	5
Community Living Supports	H2015	15 Minutes	37	38,213	$250,961	7.33%	$6,783	$7	1,033
Community Living Supports	H2016	Days	31	4,287	$455,463	13.30%	$14,692	$106	138
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	124	896	$77,111	2.25%	$622	$86	7
Crisis Residential	H0018	Days	21	362	$106,785	3.12%	$5,085	$295	17
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	320	1,798	$73,246	2.14%	$229	$41	6
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	2	2	$1,379	0.04%	$690	$690	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	2	135	$65,250	1.90%	$32,625	$483	68
Inpatient Psychiatric Services in Private IMD	0100	Days	7	59	$28,222	0.82%	$4,032	$478	8
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	11	164	$7,906	0.23%	$719	$48	15
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	288	1,317	$123,631	3.61%	$429	$94	5
MH Therapy & Counseling	90804- 90857	Encounter	174	1,496	$278,530	8.13%	$1,601	$186	9
Nursing Home MH Monitoring	T1017	15 Minutes	1	13	$858	0.03%	$858	$66	13
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	2	2	$748	0.02%	$374	$374	1
Partial Hospitalization	Rev 0912, 0913	Days	3	20	$6,053	0.18%	$2,018	$303	7
Peer-directed/operated Svs	H0038	15 Minutes	90	0	$90,570	2.64%	$1,006	$0	0
Personal care in Spec Res	T1020	Days	31	4,287	$187,783	5.48%	$6,058	$44	138

Sanilac

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	8	3,310	$19,400	0.57%	$2,425	$6	414
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	11	621	$6,116	0.18%	$556	$10	56
Supports Coordination	T1016	15 Minutes	7	73	$9,150	0.27%	$1,307	$125	10
Targeted Case Mangement	T1017	15 Minutes	199	6,839	$451,514	13.18%	$2,269	$66	34
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	242	327	$107,232	3.13%	$443	$328	1
Setting Total:					$3,425,244	100.00%	$1,685		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		446			$3,425,244	100.00%			

Shiawassee

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	46	5,648	$375,440	15.68%	$8,162	$66	123
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	260	399	$89,115	3.72%	$343	$223	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	0	0	$0	0.00%	$0	$0	0
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	104	667	$299,788	12.52%	$2,883	$449	6
Community Living Supports	H2015	15 Minutes	2	59,988	$230,701	9.64%	$115,351	$4	29,994
Community Living Supports	H2016	Days	1	183	$40,080	1.67%	$40,080	$219	183
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	174	1,032	$64,904	2.71%	$373	$63	6
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	2	11	$597	0.02%	$299	$54	6
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	2	2	$53	0.00%	$27	$27	1
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	3	876	$360,548	15.06%	$120,183	$412	292
Inpatient Psychiatric Services in Private IMD	0100	Days	1	48	$5,544	0.23%	$5,544	$116	48
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	34	528	$28,630	1.20%	$842	$54	16
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	243	943	$64,525	2.70%	$266	$68	4
MH Therapy & Counseling	90804- 90857	Encounter	281	1,992	$237,405	9.92%	$845	$119	7
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$642	0.03%	$642	$642	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	50	2,533	$13,860	0.58%	$277	$5	51
Personal care in Spec Res	T1020	Days	1	183	$2,447	0.10%	$2,447	$13	183

Shiawassee

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	4	638	$2,492	0.10%	$623	$4	160
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	2	53	$143	0.01%	$72	$3	27
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	20	9,318	$62,015	2.59%	$3,101	$7	466
Supports Coordination	T1016	15 Minutes	6	20	$1,257	0.05%	$210	$63	3
Targeted Case Mangement	T1017	15 Minutes	193	4,404	$288,417	12.05%	$1,494	$65	23
Transportation	T2003, T2004, T 2005	Encounter/Trip	19	1,556	$10,690	0.45%	$563	$7	82
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	0	0	$0	0.00%	$0	$0	0
Setting Total:					$2,179,293	91.02%	$1,504		
Day Program Setting	S5100	15 Minutes	9	27,260	$129,898	5.43%	$14,433	$5	3,029
Specialized Residential Setting	S5140, S5145	Days	2	366	$85,055	3.55%	$42,528	$232	183
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$214,953	8.98%	$19,541		
Total Population and Cost		592			$2,394,246	100.00%			

St. Clair

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	73	14,023	$522,926	5.80%	$7,163	$37	192
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,069	2,054	$530,261	5.88%	$496	$258	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	4	12	$2,418	0.03%	$605	$202	3
Behavior Management Review	H2000	Encounter	2	3	$157	0.00%	$79	$52	2
Clubhouse Program	H2030	15 Minutes	195	170,850	$602,445	6.68%	$3,089	$4	876
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	161	1,242	$797,419	8.84%	$4,953	$642	8
Community Living Supports	H2015	15 Minutes	215	32,459	$132,395	1.47%	$616	$4	151
Community Living Supports	H2016	Days	95	12,827	$1,314,051	14.57%	$13,832	$102	135
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	50	491	$19,264	0.21%	$385	$39	10
Crisis Residential	H0018	Days	24	356	$81,638	0.91%	$3,402	$229	15
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	1	5	$832	0.01%	$832	$166	5
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	6	7	$929	0.01%	$155	$133	1
Health Services	S9445, S9446, S9470	Encounter	41	104	$15,281	0.17%	$373	$147	3
Health Services	97802, 97803, H0034, T1002	15 Minutes	454	3,918	$391,162	4.34%	$862	$100	9
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	5	1,312	$418,649	4.64%	$83,730	$319	262
Inpatient Psychiatric Services in Private IMD	0100	Days	38	305	$140,420	1.56%	$3,695	$460	8
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	51	510	$33,611	0.37%	$659	$66	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	944	3,973	$245,732	2.72%	$260	$62	4
MH Therapy & Counseling	90804- 90857	Encounter	704	7,854	$939,943	10.42%	$1,335	$120	11
Nursing Home MH Monitoring	T1017	15 Minutes	47	1,318	$67,661	0.75%	$1,440	$51	28
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	9	258	$13,117	0.15%	$1,457	$51	29
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	23	23	$16,501	0.18%	$717	$717	1
Partial Hospitalization	Rev 0912, 0913	Days	23	118	$58,712	0.65%	$2,553	$498	5
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$126,431	1.40%	$0	$0	0
Personal care in Spec Res	T1020	Days	95	12,827	$213,341	2.37%	$2,246	$17	135

St. Clair

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	22	62,345	$261,702	2.90%	$11,896	$4	2,834
Respite Care	S5151, H0045	Days	1	10	$352	0.00%	$352	$35	10
Skill-building Assistance	H2014	15 Minutes	43	97,255	$228,055	2.53%	$5,304	$2	2,262
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	4	2,450	$9,802	0.11%	$2,451	$4	613
Supports Coordination	T1016	15 Minutes	13	393	$27,132	0.30%	$2,087	$69	30
Targeted Case Mangement	T1017	15 Minutes	805	23,111	$1,186,436	13.16%	$1,474	$51	29
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	423	663	$149,721	1.66%	$354	$226	2
Setting Total:					$8,548,496	94.78%	$1,516		
Day Program Setting	S5100	15 Minutes	98	66,146	$281,542	3.12%	$2,873	$4	675
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	17	3,647	$188,836	2.09%	$11,108	$52	215
Setting Total:					$470,378	5.22%	$4,090		
Total Population and Cost		1,488			$9,018,874	100.00%			

St. Joseph

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	45	14,429	$315,853	7.96%	$7,019	$22	321
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	439	630	$131,901	3.32%	$300	$209	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	2	3	$577	0.01%	$289	$192	2
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	43	77,085	$248,126	6.25%	$5,770	$3	1,793
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	72	694	$323,266	8.15%	$4,490	$466	10
Community Living Supports	H2015	15 Minutes	5	6,830	$13,806	0.35%	$2,761	$2	1,366
Community Living Supports	H2016	Days	69	7,699	$706,725	17.81%	$10,242	$92	112
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	337	2,412	$150,997	3.80%	$448	$63	7
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	2	2	$2,436	0.06%	$1,218	$1,218	1
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	8	11	$3,354	0.08%	$419	$305	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	7	732	$312,490	7.87%	$44,641	$427	105
Inpatient Psychiatric Services in Private IMD	0100	Days	0	0	$0	0.00%	$0	$0	0
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	41	491	$7,895	0.20%	$193	$16	12
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	703	2,706	$302,422	7.62%	$430	$112	4
MH Therapy & Counseling	90804- 90857	Encounter	432	2,630	$216,264	5.45%	$501	$82	6
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	1	2	$127	0.00%	$127	$64	2
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	2	2	$319	0.01%	$160	$160	1
Partial Hospitalization	Rev 0912, 0913	Days	1	8	$2,189	0.06%	$2,189	$274	8
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	70	7,659	$699,335	17.62%	$9,991	$91	109

St. Joseph

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	1	112	$383	0.01%	$383	$3	112
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	6	3,914	$7,829	0.20%	$1,305	$2	652
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	38	42,509	$101,285	2.55%	$2,665	$2	1,119
Supports Coordination	T1016	15 Minutes	4	35	$2,160	0.05%	$540	$62	9
Targeted Case Mangement	T1017	15 Minutes	171	14,421	$408,860	10.30%	$2,391	$28	84
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	122	129	$10,168	0.26%	$83	$79	1
Setting Total:					$3,968,767	100.00%	$1,514		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		1,107			$3,968,767	100.00%			

Summit Pointe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	79	9,931	$513,320	4.97%	$6,498	$52	126
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	1,211	1,436	$370,712	3.59%	$306	$258	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	3	27	$590	0.01%	$197	$22	9
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	6	8	$2,519	0.02%	$420	$315	1
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	1	286	$1,001	0.01%	$1,001	$3	286
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	250	1,545	$1,284,161	12.43%	$5,137	$831	6
Community Living Supports	H2015	15 Minutes	238	36,826	$562,548	5.44%	$2,364	$15	155
Community Living Supports	H2016	Days	13	1,923	$373,737	3.62%	$28,749	$194	148
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	148	1,107	$78,515	0.76%	$531	$71	7
Crisis Residential	H0018	Days	28	126	$44,666	0.43%	$1,595	$354	5
Electroconvulsive Therapy	90870, 0901 rev	Encounter	2	60	$17,789	0.17%	$8,895	$296	30
Electroconvulsive Therapy	00104	Minutes	2	234	$3,625	0.04%	$1,813	$15	117
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	1	3	$640	0.01%	$640	$213	3
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	0	0	$0	0.00%	$0	$0	0
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	8	28	$19,419	0.19%	$2,427	$694	4
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	12	1,328	$565,660	5.47%	$47,138	$426	111
Inpatient Psychiatric Services in Private IMD	0100	Days	3	26	$17,313	0.17%	$5,771	$666	9
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	104	1,679	$91,243	0.88%	$877	$54	16
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,194	3,600	$471,307	4.56%	$395	$131	3
MH Therapy & Counseling	90804- 90857	Encounter	1,083	6,984	$1,086,297	10.51%	$1,003	$156	6
Nursing Home MH Monitoring	T1017	15 Minutes	38	416	$31,544	0.31%	$830	$76	11
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	10	$262	0.00%	$262	$26	10
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	13	1,896	$63,180	0.61%	$4,860	$33	146

Summit Pointe

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	1	48	$1,259	0.01%	$1,259	$26	48
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	2	841	$3,904	0.04%	$1,952	$5	421
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	230	238,787	$3,344,850	32.37%	$14,543	$14	1,038
Supports Coordination	T1016	15 Minutes	2	3	$184	0.00%	$92	$61	2
Targeted Case Mangement	T1017	15 Minutes	482	14,287	$836,016	8.09%	$1,734	$59	30
Transportation	T2003, T2004, T 2005	Encounter/Trip	6	8	$738	0.01%	$123	$92	1
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	0	0	$0	0.00%	$0	$0	0
Setting Total:					$9,786,998	94.70%	$1,896		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	18	2,355	$547,310	5.30%	$30,406	$232	131
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$547,310	5.30%	$30,406		
Total Population and Cost		2,582			$10,334,308	100.00%			

Tuscola

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	63	6,063	$455,381	13.94%	$7,228	$75	96
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	442	714	$149,794	4.59%	$339	$210	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	8	36	$2,645	0.08%	$331	$73	5
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	83	588	$310,891	9.52%	$3.746	$529	7
Community Living Supports	H2015	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Living Supports	H2016	Days	63	2,429	$381,619	11.68%	$6.057	$157	39
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	243	2,809	$173,820	5.32%	$715	$62	12
Crisis Residential	H0018	Days	62	257	$146,974	4.50%	$2.371	$572	4
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	3	15	$464	0.01%	$155	$31	5
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	38	314	$16,141	0.49%	$425	$51	8
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	7	595	$288,584	8.83%	$41,226	$485	85
Inpatient Psychiatric Services in Private IMD	0100	Days	1	33	$6,061	0.19%	$6,061	$184	33
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	27	270	$16,703	0.51%	$619	$62	10
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	517	2,757	$241,883	7.40%	$468	$88	5
MH Therapy & Counseling	90804- 90857	Encounter	390	3,999	$246,426	7.54%	$632	$62	10
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	2	8	$400	0.01%	$200	$50	4
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	1	1	$422	0.01%	$422	$422	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	535	0	$86,467	2.65%	$162	$0	0
Personal care in Spec Res	T1020	Days	5	1,048	$13,588	0.42%	$2,718	$13	210

Tuscola

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	0	0	$0	0.00%	$0	$0	0
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	43	4,278	$68,714	2.10%	$1,598	$16	99
Supports Coordination	T1016	15 Minutes	6	51	$2,888	0.09%	$481	$57	9
Targeted Case Mangement	T1017	15 Minutes	274	5,803	$479,686	14.68%	$1,751	$83	21
Transportation	T2003, T2004, T 2005	Encounter/Trip	17	666	$8,921	0.27%	$525	$13	39
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	3	6	$1,459	0.04%	$486	$243	2
Setting Total:					$3,099,931	94.89%	$1,094		
Day Program Setting	S5100	15 Minutes	29	36,092	$166,999	5.11%	$5,759	$5	1,245
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$166,999	5.11%	$5,759		
Total Population and Cost		818			$3,266,930	100.00%			

Van Buren

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	94	10,845	$975,934	17.86%	$10,382	$90	115
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	804	1,240	$182,468	3.34%	$227	$147	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	8	28	$2,510	0.05%	$314	$90	4
Behavior Management Review	H2000	Encounter	2	2	$290	0.01%	$145	$145	1
Clubhouse Program	H2030	15 Minutes	52	65,715	$418,665	7.66%	$8,051	$6	1,264
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	41	342	$137,849	2.52%	$3,362	$403	8
Community Living Supports	H2015	15 Minutes	42	32,796	$108,568	1.99%	$2,585	$3	781
Community Living Supports	H2016	Days	42	3,447	$619,896	11.34%	$14,759	$180	82
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	527	3,524	$82,964	1.52%	$157	$24	7
Crisis Residential	H0018	Days	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	42	436	$13,726	0.25%	$327	$31	10
Health Services	97802, 97803, H0034, T1002	15 Minutes	2	12	$216	0.00%	$108	$18	6
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	8	436	$202,340	3.70%	$25,293	$464	55
Inpatient Psychiatric Services in Private IMD	0100	Days	25	258	$160,385	2.94%	$6,415	$622	10
Intensive Crisis Stabilization	S9484	Hour	3	3	$276	0.01%	$92	$92	1
Medication Administration	90782, 90788, 99506	Encounter	47	99	$1,781	0.03%	$38	$18	2
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	570	2,795	$174,408	3.19%	$306	$62	5
MH Therapy & Counseling	90804- 90857	Encounter	857	5,756	$440,523	8.06%	$514	$77	7
Nursing Home MH Monitoring	T1017	15 Minutes	40	503	$45,242	0.83%	$1,131	$90	13
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	3	31	$558	0.01%	$186	$18	10
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	40	40	$2,878	0.05%	$72	$72	1
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	63	6,705	$126,293	2.31%	$2,005	$19	106

Van Buren

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	18	28,493	$185,574	3.40%	$10,310	$7	1,583
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	42	7,386	$52,058	0.95%	$1,239	$7	176
Supports Coordination	T1016	15 Minutes	14	196	$23,506	0.43%	$1,679	$120	14
Targeted Case Mangement	T1017	15 Minutes	187	7,638	$688,259	12.60%	$3,681	$90	41
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	519	620	$57,697	1.06%	$111	$93	1
Setting Total:					$4,704,864	86.10%	$1,150		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	46	3,835	$759,419	13.90%	$16,509	$198	83
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$759,419	13.90%	$16,509		
Total Population and Cost		1,722			$5,464,283	100.00%			

Washtenaw

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	182	49,486	$3,414,534	22.75%	$18,761	$69	272
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	676	1,079	$170,010	1.13%	$251	$158	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	2	48	$1,440	0.01%	$720	$30	24
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	7	15	$2,700	0.02%	$386	$180	2
Behavior Management Review	H2000	Encounter	1	1	$150	0.00%	$150	$150	1
Clubhouse Program	H2030	15 Minutes	22	14,958	$214,946	1.43%	$9,770	$14	680
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	467	4,211	$2,027,481	13.51%	$4,342	$481	9
Community Living Supports	H2015	15 Minutes	78	151,238	$570,874	3.80%	$7,319	$4	1,939
Community Living Supports	H2016	Days	67	19,518	$1,554,080	10.36%	$23,195	$80	291
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	0	0	$0	0.00%	$0	$0	0
Crisis Residential	H0018	Days	108	1,244	$177,593	1.18%	$1,644	$143	12
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	486	3,559	$250,052	1.67%	$515	$70	7
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	53	688	$68,800	0.46%	$1,298	$100	13
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	715	9,692	$434,824	2.90%	$608	$45	14
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	8	31	$10,174	0.07%	$1,272	$328	4
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	27	4,945	$1,788,225	11.92%	$66,231	$362	183
Inpatient Psychiatric Services in Private IMD	0100	Days	2	9	$3,915	0.03%	$1,958	$435	5
Intensive Crisis Stabilization	S9484	Hour	2	10	$1,500	0.01%	$750	$150	5
Medication Administration	90782, 90788, 99506	Encounter	346	3,807	$132,405	0.88%	$383	$35	11
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	1,332	6,353	$635,050	4.23%	$477	$100	5
MH Therapy & Counseling	90804- 90857	Encounter	289	3,644	$258,939	1.73%	$896	$71	13
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	55	119	$13,760	0.09%	$250	$116	2
Partial Hospitalization	Rev 0912, 0913	Days	10	132	$27,449	0.18%	$2,745	$208	13
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	66	16,931	$296,490	1.98%	$4,492	$18	257

Washtenaw

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	1	672	$1,297	0.01%	$1,297	$2	672
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	4	2,372	$11,860	0.08%	$2,965	$5	593
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	1	1	$60	0.00%	$60	$60	1
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	4	7	$330	0.00%	$83	$47	2
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	17	309	$7,725	0.05%	$454	$25	18
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	66	125,431	$523,833	3.49%	$7,937	$4	1,900
Supports Coordination	T1016	15 Minutes	32	1,305	$65,250	0.43%	$2,039	$50	41
Targeted Case Mangement	T1017	15 Minutes	1,314	41,108	$2,055,400	13.70%	$1,564	$50	31
Transportation	T2003, T2004, T 2005	Encounter/Trip	0	0	$0	0.00%	$0	$0	0
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	690	860	$86,000	0.57%	$125	$100	1
Setting Total:					$14,807,146	98.67%	$2,077		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	56	19,394	$199,564	1.33%	$3,564	$10	346
Setting Total:					$199,564	1.33%	$3,564		
Total Population and Cost		1,901			$15,006,710	100.00%			

West Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	83	13,033	$688,859	16.82%	$8,300	$53	157
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	782	1,177	$240,927	5.88%	$308	$205	2
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	14	73	$12,599	0.31%	$900	$173	5
Behavior Management Review	H2000	Encounter	7	36	$9,320	0.23%	$1,331	$259	5
Clubhouse Program	H2030	15 Minutes	0	0	$0	0.00%	$0	$0	0
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	105	901	$427,629	10.44%	$4,073	$475	9
Community Living Supports	H2015	15 Minutes	24	8,586	$48,160	1.18%	$2,007	$6	358
Community Living Supports	H2016	Days	8	2,066	$276,339	6.75%	$34,542	$134	258
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	410	3,339	$140,466	3.43%	$343	$42	8
Crisis Residential	H0018	Days	11	56	$16,793	0.41%	$1,527	$300	5
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	28	443	$66,899	1.63%	$2,389	$151	16
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	5	6	$259	0.01%	$52	$43	1
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	3	4	$1,162	0.03%	$387	$290	1
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	2	44	$22,782	0.56%	$11,391	$518	22
Inpatient Psychiatric Services in Private IMD	0100	Days	6	37	$17,561	0.43%	$2,927	$475	6
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	24	220	$9,492	0.23%	$396	$43	9
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	597	3,264	$330,549	8.07%	$554	$101	5
MH Therapy & Counseling	90804- 90857	Encounter	361	3,344	$377,158	9.21%	$1,045	$113	9
Nursing Home MH Monitoring	T1017	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	8	2,065	$83,916	2.05%	$10,490	$41	258

West Michigan

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	0	0	$0	0.00%	$0	$0	0
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	14	3,275	$16,780	0.41%	$1,199	$5	234
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	5	433	$2,219	0.05%	$444	$5	87
Supports Coordination	T1016	15 Minutes	0	0	$0	0.00%	$0	$0	0
Targeted Case Mangement	T1017	15 Minutes	562	22,016	$1,187,404	29.00%	$2,113	$54	39
Transportation	T2003, T2004, T 2005	Encounter/Trip	3	289	$1,870	0.05%	$623	$6	96
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	320	391	$67,482	1.65%	$211	$173	1
Setting Total:					$4,046,624	98.83%	$1,197		
Day Program Setting	S5100	15 Minutes	1	286	$1,111	0.03%	$1,111	$4	286
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	2	572	$46,892	1.15%	$23,446	$82	286
Setting Total:					$48,003	1.17%	$16,001		
Total Population and Cost		1,386			$4,094,627	100.00%			

Woodlands

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
ACT	H0039	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	T1001, 90801, 90802, 90887, H0002, H0031, T1023, T2010, T2011, 99241-99275	Encounter	535	564	$72,756	2.29%	$136	$129	1
Assessment, Evaluation, and Testing	97802, 97803	15 Minutes	0	0	$0	0.00%	$0	$0	0
Assessment, Evaluation, and Testing	96100, 96115, 96117, 96110, 96111, 96105,	Hour	0	0	$0	0.00%	$0	$0	0
Behavior Management Review	H2000	Encounter	0	0	$0	0.00%	$0	$0	0
Clubhouse Program	H2030	15 Minutes	36	38,879	$126,357	3.97%	$3,510	$3	1,080
Community Psychiatric Inpatient	Rev 0100, 0101, 0114, 0124, 0134, 1054	Days	3	14	$8,179	0.26%	$2,726	$584	5
Community Living Supports	H2015	15 Minutes	47	70,204	$333,469	10.49%	$7,095	$5	1,494
Community Living Supports	H2016	Days	3	1,055	$121,853	3.83%	$40,618	$116	352
Community Living Supports	T2036, T2037	Session	0	0	$0	0.00%	$0	$0	0
Crisis Intervention	H2011	15 Minutes	177	1,028	$61,166	1.92%	$346	$60	6
Crisis Residential	H0018	Days	1	4	$1,280	0.04%	$1,280	$320	4
Electroconvulsive Therapy	90870, 0901 rev	Encounter	0	0	$0	0.00%	$0	$0	0
Electroconvulsive Therapy	00104	Minutes	0	0	$0	0.00%	$0	$0	0
Enhanced Dental		Encounter	0	0	$0	0.00%	$0	$0	0
Enhanced Medical equipment, Assistive Technology, and Children's Waiver Specialized Equipment	E1399, T2029, T2039	Items	0	0	$0	0.00%	$0	$0	0
Enhanced medical/specialized Supplies	T1999, T2028, S5199	Items	0	0	$0	0.00%	$0	$0	0
Enhanced Pharmacy	T1999	Items	0	0	$0	0.00%	$0	$0	0
Environmental Modifications and Children's Waiver Environmental Accessibility Adaptations	S5165	Service	0	0	$0	0.00%	$0	$0	0
Extended Observation Beds	Rev 0762	Hour	0	0	$0	0.00%	$0	$0	0
Family Training (including Support and Skills Development)	S5111, G0177	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	S9445, S9446, S9470	Encounter	0	0	$0	0.00%	$0	$0	0
Health Services	97802, 97803, H0034, T1002	15 Minutes	331	571	$18,415	0.58%	$56	$32	2
Health Services	97804	30 Minutes	0	0	$0	0.00%	$0	$0	0
Housing Assistance	T2038	Month	0	0	$0	0.00%	$0	$0	0
Inpatient Psychiatric Services in State Hospital Facility	0100	Days	50	919	$402,320	12.66%	$8,046	$438	18
Inpatient Psychiatric Services in Private IMD	0100	Days	35	208	$106,647	3.35%	$3,047	$513	6
Intensive Crisis Stabilization	S9484	Hour	0	0	$0	0.00%	$0	$0	0
Medication Administration	90782, 90788, 99506	Encounter	25	202	$26,058	0.82%	$1,042	$129	8
Medication Administration	H2010	15 Minutes	0	0	$0	0.00%	$0	$0	0
Medication Reviews	90862, M0064	Encounter	462	959	$75,761	2.38%	$164	$79	2
MH Therapy & Counseling	90804- 90857	Encounter	348	1,598	$206,142	6.48%	$592	$129	5
Nursing Home MH Monitoring	T1017	15 Minutes	3	19	$1,131	0.04%	$377	$60	6
Occupational Therapy and Physical Therapy	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97504, 97703, 97750, 97755	15 Minutes	0	0	$0	0.00%	$0	$0	0
Occupational Therapy and Physical Therapy	S8990, 97150, 97001, 97002 97003, 97004	Encounter	0	0	$0	0.00%	$0	$0	0
Partial Hospitalization	Rev 0912, 0913	Days	0	0	$0	0.00%	$0	$0	0
Peer-directed/operated Svs	H0038	15 Minutes	0	0	$0	0.00%	$0	$0	0
Personal care in Spec Res	T1020	Days	4	1,216	$50,166	1.58%	$12,542	$41	304

Woodlands

Service Category	HCPCS/Revenue Code(s):	Unit Measure	Cases	Units	Cost	Percent of Total Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Emergency Response (PERS)	S5161	Month	0	0	$0	0.00%	$0	$0	0
Personal Emergency Response (PERS)	S5160	Install.	0	0	$0	0.00%	$0	$0	0
Prevention-direct Model	H0025	Contact	0	0	$0	0.00%	$0	$0	0
Respite Care	T1005, S5150	15 Minutes	47	116,223	$734,529	23.11%	$15,628	$6	2,473
Respite Care	S5151, H0045	Days	0	0	$0	0.00%	$0	$0	0
Skill-building Assistance	H2014	15 Minutes	9	3,503	$20,142	0.63%	$2,238	$6	389
Speech & Language Therapy	92506, 92610, 92507, 92526, 92508	Encounter	0	0	$0	0.00%	$0	$0	0
SA Access & Referral	H0001, H0002	Encounter	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0004, 90804-90815	15 Minutes	0	0	$0	0.00%	$0	$0	0
SA Outpatient Treatment	H0005, 90847, 90853, 90857	Encounter	0	0	$0	0.00%	$0	$0	0
SA Intensive Outpatient Treatment	H0015	Days	0	0	$0	0.00%	$0	$0	0
SA Methadone Treatment	H0020	Encounter	0	0	$0	0.00%	$0	$0	0
SA LAAM	H0033	Encounter	0	0	$0	0.00%	$0	$0	0
SA Residential SubAcute Detox	H0012	Days	0	0	$0	0.00%	$0	$0	0
SA Residential	H0018, H0019	Days	0	0	$0	0.00%	$0	$0	0
Supported/Integrated Employment	H2023	15 Minutes	61	2,640	$81,840	2.57%	$1,342	$31	43
Supports Coordination	T1016	15 Minutes	3	33	$1,964	0.06%	$655	$60	11
Targeted Case Mangement	T1017	15 Minutes	329	11,869	$706,206	22.21%	$2,147	$60	36
Transportation	T2003, T2004, T 2005	Encounter/Trip	14	16	$5,600	0.18%	$400	$350	1
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0215	Mile	0	0	$0	0.00%	$0	$0	0
Transportation	T2002	Days	0	0	$0	0.00%	$0	$0	0
Treatment (Person-centered) Planning	H0032	Encounter	113	124	$15,996	0.50%	$142	$129	1
Setting Total:					$3,177,977	99.97%	$1,206		
Day Program Setting	S5100	15 Minutes	0	0	$0	0.00%	$0	$0	0
Specialized Residential Setting	S5140, S5145	Days	0	0	$0	0.00%	$0	$0	0
Supported Independent Housing Setting	H0043	Days	0	0	$0	0.00%	$0	$0	0
Setting Total:					$0				
Total Population and Cost		717			$3,179,033	100.00%			