

Use Code for Maternal or Infant Services	CPT* or HCPCS	Short Description*	Description Used for Billing and Payment of MIHP Services	Status	Fee Screen
Maternal	**99402	Preventive counseling, indiv	PROFESSIONAL VISIT IN OFFICE	A	\$63.36
Maternal	**99402	Preventive counseling, indiv	PROFESSIONAL VISIT IN HOME	A	\$87.36
Maternal	A0100	Nonemergency transport taxi	TRANSPORTATION TAXI	A	\$21.31
Maternal	A0110	Nonemergency transport bus	TRANSPORTATION BUS/VAN	A	\$21.20
Maternal	A0170	Transport parking fees/tolls	TRANSPORTATION/OTHER	M	\$0.01
Maternal	H1000	Prenatal care atrisk assessm	ASSESSMENT IN OFFICE	A	\$64.19
Maternal	H2000	Comp multidisipin evaluation	ASSESSMENT IN HOME	A	\$84.18
Maternal	S0215	Nonemergency transp mileage	TRANSPORTATION VOLUNTEER	A	\$0.26
Maternal	S9442	Birthing class	CHILDBIRTH EDUCATION	A	\$30.74
Maternal	T1023	Program intake assessment	SCREENING	A	\$19.20
Infant	***96154	Interv hlth/behav, fam w/pt	PROF. VISIT/DRUG EXPOSED	A	\$42.27
Infant	**99402	Preventive counseling, indiv	PROFESSIONAL VISIT IN HOME	A	\$87.36
Infant	**99402	Preventive counseling, indiv	PROFESSIONAL VISIT IN OFFICE	A	\$63.36
Infant	A0100	Nonemergency transport taxi	TRANSPORTATION TAXI	A	\$21.31
Infant	A0110	Nonemergency transport bus	TRANSPORTATION BUS/VAN	A	\$21.20
Infant	A0170	Transport parking fees/tolls	TRANSPORTATION/OTHER	M	\$0.01
Infant	H2000	Comp multidisipin evaluation	ASSESSMENT IN HOME	A	\$93.78
Infant	S0215	Nonemergency transp mileage	TRANSPORTATION VOLUNTEER	A	\$0.26
Infant	S9444	Parenting class	PARENTING EDUCATION	A	\$41.17

** The 99402 code is utilized for all MIHP visits occurring in the home, office or places other than the home. Home visits are reimbursed at a different rate than clinic visits. To receive appropriate reimbursement for visits, it is important that providers include the place of service when billing these codes. Reimbursement for visits will be determined by the place of service code entered on the claim. For purposes of billing, coverage is limited to a 30-minute visit.

***For code 96154, the HCPCS definition identifies one unit as being a 15-minute session. Current policy states that each infant visit must extend at least 30 minutes in duration to be a billable service. In order to receive full reimbursement for these services, the provider should bill for two units when using this code. Medicaid will reimburse for two units or a total of 30 minutes per code. For purposes of billing, coverage is limited to a 30-minute visit. Providers must bill this code as two units to receive the total visit fee of \$88.05.