

SECTION 404 (2) (c) Part 3
TOTAL CMHSP COSTS BY SERVICE
CATEGORY AND CMHSP
FY 2007

Children with Mental Illness
(Child MI)

Overview

The data that are presented in this section were provided by CMHSPs as required by the FY 2007 MDCH/CMHSP contract. Cost data were collected from October 1, 2006 to September 30, 2007 and submitted to MDCH by January 31, 2008. The data in this section represent the total costs associated with providing mental health services to children with mental illness (child 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).

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Allegan Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	153	\$29,721	\$14,861	\$194	77
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	6	69	\$33,350	\$5,558	\$483	12
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	14	117	\$49,686	\$3,549	\$425	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	2	9	\$1,308	\$654	\$145	5
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	00104			Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	90772			Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment	90801			Encounter	38	38	\$8,938	\$235	\$235	1
Substance Abuse: Psychiatric Evaluation	90801			Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment	90802			Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation	90802			Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	90804			Encounter 20-30 Min	87	252	\$20,364	\$234	\$81	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	114	767	\$109,867	\$964	\$143	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	20	30	\$6,398	\$320	\$213	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	46	135	\$17,105	\$372	\$127	3
Therapy-Family Therapy		90847		Encounter	128	756	\$96,608	\$755	\$128	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	85	317	\$31,440	\$370	\$99	4

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	13	30	\$5,428	\$418	\$181	2
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	1	52	\$1,370	\$1,370	\$26	52
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Children with Mental Illness

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Allegan	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	8	9	\$658	\$82	\$73	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	22	315	\$53,068	\$2,412	\$168	14
Assessment		H0031		Encounter	179	190	\$30,628	\$171	\$161	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	192	442	\$43,132	\$225	\$98	2
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	42	8,140	\$379,137	\$9,027	\$47	194
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	7	78	\$2,219	\$317	\$28	11
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	3	\$206	\$206	\$69	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	20	105	\$5,194	\$260	\$49	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	9	435	\$4,370	\$486	\$10	48
Community Living Supports (15 Minutes)		H2015		15 Minutes	1	2,033	\$7,423	\$7,423	\$4	2,033
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	1	168	\$15,215	\$15,215	\$91	168
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	11	95	\$4,975	\$452	\$52	9
Wraparound		H2022		Days	14	294	\$92,318	\$6,594	\$314	21
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Allegan	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	36	115	\$21,112	\$586	\$184	3
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	29	33,829	\$36,921	\$1,273	\$1	1,167
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	9	700	\$8,541	\$949	\$12	78
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	3	112	\$5,597	\$1,866	\$50	37
Targeted Case Management		T1017		15 minutes	1	2	\$156	\$156	\$78	2
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	1	168	\$1,691	\$1,691	\$10	168
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	28	37	\$4,543	\$162	\$123	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	1	7	\$751	\$751	\$107	7
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Allegan	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category										
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					276		\$1,129,438			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	6	\$1,571	\$1,571	\$262	6
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	6	\$1,050	\$1,050	\$175	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	4	\$2,260	\$2,260	\$565	4
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	97	120	\$19,515	\$201	\$163	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	64	84	\$4,939	\$77	\$59	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	265	967	\$94,767	\$358	\$98	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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AuSable Valley										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	3	4	\$478	\$159	\$120	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	63	99	\$11,837	\$188	\$120	2
Therapy-Family Therapy		90847		Encounter	233	685	\$81,907	\$352	\$120	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	23	108	\$6,456	\$281	\$60	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	126	419	\$32,772	\$260	\$78	3

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			1	1	\$64	\$64	\$64	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			1	1	\$19	\$19	\$19	1
Additional Codes-Physician Services		99232			1	1	\$32	\$32	\$32	1
Additional Codes-Physician Services		99233			1	1	\$45	\$45	\$45	1
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	8	7	\$835	\$104	\$119	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	198	437	\$46,665	\$236	\$107	2
Assessment		H0031		Encounter	376	401	\$57,855	\$154	\$144	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	310	326	\$38,981	\$126	\$120	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	58	5,057	\$313,028	\$5,397	\$62	87
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1	10	\$872	\$872	\$87	10
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	62	454	\$13,392	\$216	\$29	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	39	1,157	\$11,373	\$292	\$10	30
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	56	1,916	\$105,706	\$1,888	\$55	34
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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AuSable Valley										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	16	70	\$12,901	\$806	\$184	4
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	2	6,188	\$4,641	\$2,321	\$1	3,094
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	84	88	\$4,745	\$56	\$54	1
Health Services		T1002		Up to 15 min	135	663	\$8,938	\$66	\$13	5
Respite Care		T1005		15 Minutes	3	1,836	\$7,637	\$2,546	\$4	612
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	32	576	\$37,809	\$1,182	\$66	18
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	17	17	\$2,033	\$120	\$120	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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AuSable Valley Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					466		\$925,123			

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Children with Mental Illness

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State of Michigan

Barry Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/TMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	16	112	\$77,821	\$4,864	\$695	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	12	14	\$4,272	\$356	\$305	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	44	69	\$5,086	\$116	\$74	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	2	6	\$1,048	\$524	\$175	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	170	599	\$96,492	\$568	\$161	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Barry

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	5	5	\$1,106	\$221	\$221	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	158	580	\$83,623	\$529	\$144	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	89	874	\$39,803	\$447	\$46	10
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	34	89	\$8,422	\$248	\$95	3

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Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	5	9	\$1,327	\$265	\$147	2
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	1	1	\$59	\$59	\$59	1

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Barry

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	6	14	\$516	\$86	\$37	2
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	157	160	\$26,038	\$166	\$163	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	1	18	\$4,028	\$4,028	\$224	18
Assessment		H0031		Encounter	38	44	\$4,323	\$114	\$98	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	6	6	\$885	\$147	\$147	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	18	3,034	\$130,440	\$7,247	\$43	169
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	27	197	\$9,657	\$358	\$49	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	1	320	\$2,034	\$2,034	\$6	320
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	1	\$74	\$74	\$74	1
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	1	109	\$14,397	\$14,397	\$132	109
Respite		S5150		15 Minutes	11	11,456	\$21,465	\$1,951	\$2	1,041
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	8	12	\$468	\$58	\$39	2
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	2	7	\$498	\$249	\$71	4
Residential Room and Board		S9976		Days	1	109	\$2,125	\$2,125	\$19	109
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	1	2	\$47	\$47	\$24	2
Respite Care		T1005		15 Minutes	2	756	\$4,704	\$2,352	\$6	378
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	13	102	\$16,898	\$1,300	\$166	8
Targeted Case Management		T1017		15 minutes	7	46	\$7,592	\$1,085	\$165	7
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	15	15	\$2,867	\$191	\$191	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					300		\$568,116			

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State of Michigan

Bay-Arenac

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	10	\$2,236	\$1,118	\$224	5
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	11	144	\$74,774	\$6,798	\$519	13
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	40	255	\$165,745	\$4,144	\$650	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	240	264	\$45,724	\$191	\$173	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	93	207	\$10,836	\$117	\$52	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	448	3,599	\$277,262	\$619	\$77	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	74	185	\$35,265	\$477	\$191	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	142	590	\$41,249	\$290	\$70	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	54	211	\$7,476	\$138	\$35	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	412	2,392	\$122,611	\$298	\$51	6

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	13	67	\$18,222	\$1,402	\$272	5
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	19	46	\$774	\$41	\$17	2
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			3	3	\$232	\$77	\$77	1
Additional Codes-Physician Services		99222			34	40	\$5,098	\$150	\$127	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			31	114	\$3,217	\$104	\$28	4
Additional Codes-Physician Services		99232			34	107	\$4,986	\$147	\$47	3
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	3	3	\$188	\$63	\$63	1
Additional Codes-Physician Services		99253		Encounter	1	1	\$125	\$125	\$125	1
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	1	1,096	\$547	\$547	\$0	1,096
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	228	234	\$35,919	\$158	\$153	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	21	28	\$2,236	\$106	\$80	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	169	13,987	\$641,600	\$3,796	\$46	83
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	1	14	\$129	\$129	\$9	14
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	2	9	\$861	\$431	\$96	5
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	1	\$211	\$211	\$211	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	29	96	\$7,273	\$251	\$76	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	4	1,172	\$4,366	\$1,091	\$4	293
Community Living Supports (Daily)		H2016		Per Diem	1	217	\$7,195	\$7,195	\$33	217
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	1	55	\$4,180	\$4,180	\$76	55
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	1	2,991	\$6,586	\$6,586	\$2	2,991
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	3	6	\$2,692	\$897	\$449	2
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	19	19	\$2,464	\$130	\$130	1
Health Services		T1002		Up to 15 min	45	75	\$3,423	\$76	\$46	2
Respite Care		T1005		15 Minutes	3	820	\$1,614	\$538	\$2	273
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	2	24	\$2,515	\$1,257	\$105	12
Targeted Case Management		T1017		15 minutes	162	5,329	\$298,132	\$1,840	\$56	33
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	110	147	\$107,851	\$980	\$734	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					798		\$1,945,813			

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	29	\$5,075	\$5,075	\$175	29
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	24	218	\$155,538	\$6,481	\$713	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	1	\$707	\$707	\$707	1
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	135	140	\$47,097	\$349	\$336	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	75	216	\$26,240	\$350	\$121	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	253	1,170	\$229,474	\$907	\$196	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$280	\$280	\$280	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	21	56	\$14,456	\$688	\$258	3
Therapy-Family Therapy		90847		Encounter	105	446	\$96,091	\$915	\$215	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	13	178	\$9,980	\$768	\$56	14
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	27	160	\$19,297	\$715	\$121	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	184	611	\$85,308	\$464	\$140	3

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	1	1	\$56	\$56	\$56	1
Additional Codes-Physician Services		99212		Encounter	6	8	\$523	\$87	\$65	1
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	5	6	\$1,682	\$336	\$280	1
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment- Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	15	15	\$1,402	\$93	\$93	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	335	339	\$134,017	\$400	\$373	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharnalological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	118	12,617	\$1,179,010	\$9,992	\$93	107
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	5	32	\$1,151	\$230	\$36	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	10	4,289	\$17,608	\$1,761	\$4	429
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	1	158	\$1,327	\$1,327	\$8	158

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Berrien	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	6	456	\$990	\$165	\$2	76
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	4	7	\$336	\$84	\$48	2
Respite Care		T1005		15 Minutes	7	69	\$8,284	\$1,183	\$120	10
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	7	203	\$22,763	\$3,252	\$112	29
Targeted Case Management		T1017		15 minutes	21	516	\$53,040	\$2,526	\$103	25
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	76	97	\$27,193	\$358	\$280	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					615		\$2,138,924			

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State of Michigan

Clinton Eaton Ingham

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	73	\$12,775	\$12,775	\$175	73
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	41	357	\$131,506	\$3,207	\$368	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	44	\$33,044	\$8,261	\$751	11
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	729	830	\$344,075	\$472	\$415	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	29	41	\$4,542	\$157	\$111	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	1	1	\$111	\$111	\$111	1
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	206	1,128	\$208,274	\$1,011	\$185	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	2	2	\$370	\$185	\$185	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	11	11	\$3,249	\$295	\$295	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	1	1	\$295	\$295	\$295	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	169	367	\$107,645	\$637	\$293	2
Therapy-Family Therapy		90847		Encounter	323	1,564	\$302,082	\$935	\$193	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	31	283	\$40,437	\$1,304	\$143	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	219	1,012	\$177,514	\$811	\$175	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	2	2	\$677	\$339	\$339	1
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	9	9	\$6,775	\$753	\$753	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	1	4	\$1,132	\$1,132	\$283	4
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	167	923	\$324,511	\$1,943	\$352	6
Assessment		H0031		Encounter	168	172	\$68,862	\$410	\$400	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	19	20	\$5,032	\$265	\$252	1
Substance Abuse: Pharnalological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	742	55,086	\$3,432,889	\$4,627	\$62	74
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1	8	\$897	\$897	\$112	8
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	20	86	\$24,669	\$1,233	\$287	4
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	248	1,426	\$180,091	\$726	\$126	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	3	25	\$97	\$32	\$4	8
Community Living Supports (Daily)		H2016		Per Diem	1	1	\$27	\$27	\$27	1
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	3	561	\$77,543	\$25,848	\$138	187
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	97	3,562	\$362,851	\$3,741	\$102	37
Wraparound		H2022		Days	18	49	\$51,106	\$2,839	\$1,043	3
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	3	29	\$198	\$66	\$7	10
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	1	1	\$122	\$122	\$122	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	50	255	\$15,877	\$318	\$62	5
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	112	1,318	\$422,758	\$3,775	\$321	12
Respite		S5150		15 Minutes	15	8,534	\$182,306	\$12,154	\$21	569
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	1	1	\$149	\$149	\$149	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	84	126	\$112,880	\$1,344	\$896	2
Residential Room and Board		S9976		Days	1	4	\$142	\$142	\$36	4
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	242	958	\$53,228	\$220	\$56	4
Respite Care		T1005		15 Minutes	190	21,961	\$50,337	\$265	\$2	116
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	13	176	\$12,441	\$957	\$71	14
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	3	561	\$5,427	\$1,809	\$10	187
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	20	20	\$2,793	\$140	\$140	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,471		\$6,761,736			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	250	\$95,980	\$31,993	\$384	83
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	5	35	\$23,098	\$4,620	\$660	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	45	344	\$227,019	\$5,045	\$660	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	1	1	\$247	\$247	\$247	1
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	1	15	\$595	\$595	\$40	15
Assessment-Psychiatric Assessment		90801		Encounter	905	1,120	\$178,774	\$198	\$160	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	241	642	\$60,367	\$250	\$94	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	123	218	\$41,564	\$338	\$191	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	934	5,110	\$480,493	\$514	\$94	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	38	44	\$4,137	\$109	\$94	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	54	75	\$6,917	\$128	\$92	1
Therapy-Family Therapy		90847		Encounter	189	597	\$55,061	\$291	\$92	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	121	636	\$53,829	\$445	\$85	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	514	1,648	\$202,144	\$393	\$123	3

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	2	7	\$1,180	\$590	\$169	4
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		Encounter	16	16	\$1,807	\$113	\$113	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		Encounter	10	25	\$824	\$82	\$33	3
Additional Codes-Physician Services		99232		Encounter	14	36	\$1,963	\$140	\$55	3
Additional Codes-Physician Services		99233		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	3	3	\$298	\$99	\$99	1
Additional Codes-Physician Services		99254		Encounter	1	1	\$142	\$142	\$142	1
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0130		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0140		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
General dental services		D0150		Encounter	0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230		Encounter	0	0	\$0	\$0	\$0	0
Bitewings		D0274		Encounter	0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392		Encounter	0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393		Encounter	0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	279	293	\$40,071	\$144	\$137	1
Assessment		H0031		Encounter	165	188	\$59,675	\$362	\$317	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	457	592	\$67,115	\$147	\$113	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	10	10	\$397	\$40	\$40	1
Home Based Services		H0036		15 Minutes	343	37,416	\$1,565,485	\$4,564	\$42	109
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	3	88	\$5,563	\$1,854	\$63	29
Community Living Supports in Independent living/own home		H0043		Per diem	31	202	\$14,239	\$459	\$70	7
Respite		H0045		Per Diem	17	314	\$12,324	\$725	\$39	18
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	116	669	\$149,187	\$1,286	\$223	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	79	15,360	\$33,331	\$422	\$2	194
Community Living Supports (15 Minutes)		H2015		15 Minutes	47	37,739	\$123,407	\$2,626	\$3	803
Community Living Supports (Daily)		H2016		Per Diem	3	627	\$11,117	\$3,706	\$18	209
Community Living Supports (Daily)		H2016	TF	Per Diem	2	323	\$15,304	\$7,652	\$47	162
Community Living Supports (Daily)		H2016	TG	Per Diem	4	497	\$55,893	\$13,973	\$112	124
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	26	711	\$50,445	\$1,940	\$71	27
Wraparound		H2022		Days	12	128	\$43,520	\$3,627	\$340	11
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	160	279	\$34,205	\$214	\$123	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	10	\$1,300	\$1,300	\$130	10
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	27	29	\$4,365	\$162	\$151	1
Health Services		T1002		Up to 15 min	282	806	\$31,055	\$110	\$39	3
Respite Care		T1005		15 Minutes	151	153,981	\$227,892	\$1,509	\$1	1,020
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	27	667	\$47,310	\$1,752	\$71	25
Targeted Case Management		T1017		15 minutes	108	3,194	\$226,550	\$2,098	\$71	30
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	5	753	\$12,123	\$2,425	\$16	151
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	9	256	\$11,753	\$1,306	\$46	28
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	42	91	\$14,632	\$348	\$161	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	32	385	\$531	\$17	\$1	12
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	4	42	\$4,200	\$1,050	\$100	11
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	30	190	\$35,150	\$1,172	\$185	6
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	22	505	\$93,425	\$4,247	\$185	23
Housing Assistance		T2038		Month	10	25	\$8,807	\$881	\$352	3
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			1	0	\$3,296	\$3,296	\$0	0
Total Population and Cost					1,851		\$4,440,106			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	5	79	\$52,205	\$10,441	\$661	16
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	37	43	\$23,934	\$647	\$557	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	10	31	\$3,822	\$382	\$123	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	99	816	\$146,118	\$1,476	\$179	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	2	2	\$571	\$285	\$285	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	72	180	\$59,983	\$833	\$333	3
Therapy-Family Therapy		90847		Encounter	60	163	\$58,346	\$972	\$358	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	25	120	\$24,236	\$969	\$202	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Aiveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	52	59	\$21,702	\$417	\$368	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	62	79	\$18,642	\$301	\$236	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	25	3,713	\$304,881	\$12,195	\$82	149
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	23	120	\$15,521	\$675	\$129	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	2	130	\$1,471	\$736	\$11	65
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	3	473	\$77,860	\$25,953	\$165	158
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	3	24	\$4,084	\$1,361	\$170	8
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	17	3,718	\$6,657	\$392	\$2	219
Respite		S5151		Per Diem	1	3	\$37	\$37	\$12	3
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	1	112	\$884	\$884	\$8	112
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	9	41	\$4,373	\$486	\$107	5
Targeted Case Management		T1017		15 minutes	5	77	\$7,382	\$1,476	\$96	15
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	29	34	\$16,631	\$573	\$489	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					163		\$849,340			

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State of Michigan

Detroit-Wayne										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	328	10,822	\$2,240,973	\$6,832	\$207	33
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	476	4,264	\$2,389,548	\$5,020	\$560	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	7	34	\$27,915	\$3,988	\$821	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	32	32	\$3,975	\$124	\$124	1
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	184	2,341	\$638,358	\$3,469	\$273	13
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	7	18	\$512	\$73	\$28	3
Assessment-Psychiatric Assessment		90801		Encounter	3,725	5,175	\$810,974	\$218	\$157	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	620	696	\$97,708	\$158	\$140	1
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	1,992	7,495	\$437,407	\$220	\$58	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	3,438	19,279	\$2,387,479	\$694	\$124	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	66	303	\$22,422	\$340	\$74	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	457	2,044	\$385,850	\$844	\$189	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	67	104	\$7,037	\$105	\$68	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	183	627	\$85,249	\$466	\$136	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	127	466	\$123,892	\$976	\$266	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	108	281	\$11,240	\$104	\$40	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	1	1	\$42	\$42	\$42	1
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	16	44	\$3,857	\$241	\$88	3
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	1,062	4,039	\$260,034	\$245	\$64	4
Therapy-Family Therapy		90847		Encounter	3,080	12,477	\$1,329,966	\$432	\$107	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	524	3,055	\$371,791	\$710	\$122	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	233	1,256	\$54,122	\$232	\$43	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	3,442	15,564	\$1,325,256	\$385	\$85	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	474	701	\$60,293	\$127	\$86	1
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	1	45	\$2,025	\$2,025	\$45	45
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	281	3,548	\$366,793	\$1,305	\$103	13
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	1,934	20,139	\$2,638,646	\$1,364	\$131	10
Assessments-Other		96111		Encounter	27	33	\$5,562	\$206	\$169	1
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	2	6	\$465	\$233	\$78	3
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	1	1	\$275	\$275	\$275	1
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	8	31	\$388	\$49	\$13	4
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	1	4	\$67	\$67	\$17	4
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	2	2	\$118	\$59	\$59	1
Additional Codes-Physician Services		99254		Encounter	2	2	\$130	\$65	\$65	1
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	3	3	\$315	\$105	\$105	1
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	11	426	\$1,577	\$143	\$4	39
Additional Codes-Transportation		A0427		Refer to code descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	2,361	14,910	\$479,747	\$203	\$32	6
Assessment		H0002		Encounter	273	288	\$17,509	\$64	\$61	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	1	2	\$69	\$69	\$35	2
Prevention Services - Direct Model		H0025		Face to Face Contact	22	281	\$43,778	\$1,990	\$156	13
Assessment		H0031		Encounter	5,068	53,739	\$3,076,173	\$607	\$57	11
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	3,997	8,493	\$880,844	\$220	\$104	2
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	98	1,034	\$32,563	\$332	\$31	11
Home Based Services		H0036		15 Minutes	912	129,976	\$5,971,403	\$6,548	\$46	143
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	2	7	\$216	\$108	\$31	4
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	108	4,318	\$260,880	\$2,416	\$60	40
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	2	\$120	\$120	\$60	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	1,007	11,330	\$261,613	\$260	\$23	11
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	118	7,412	\$41,685	\$353	\$6	63
Community Living Supports (15 Minutes)		H2015		15 Minutes	2	1,370	\$3,425	\$1,713	\$3	685
Community Living Supports (Daily)		H2016		Per Diem	32	1,910	\$216,217	\$6,757	\$113	60
Community Living Supports (Daily)		H2016	TF	Per Diem	1	27	\$1,350	\$1,350	\$50	27
Community Living Supports (Daily)		H2016	TG	Per Diem	27	4,014	\$462,514	\$17,130	\$115	149
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	48	967	\$61,997	\$1,292	\$64	20
Wraparound		H2022		Days	2	15	\$2,251	\$1,126	\$150	8
Supported Employment Services		H2023		15 minutes	1	6	\$15	\$15	\$3	6

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Detroit-Wayne										
Service Category	Revenue Code	HCPDS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	74	118	\$3,056	\$41	\$26	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	1	131	\$485	\$485	\$4	131
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	904	2,811	\$449,686	\$497	\$160	3
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	12	2,221	\$521,802	\$43,484	\$235	185
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	503	1,209	\$38,269	\$76	\$32	2
Health Services		S9446		Encounter	28	61	\$1,636	\$58	\$27	2
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	133	323	\$13,224	\$99	\$41	2
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	552	1,068	\$50,049	\$91	\$47	2
Health Services		T1002		Up to 15 min	455	917	\$46,420	\$102	\$51	2
Respite Care		T1005		15 Minutes	18	15,366	\$32,043	\$1,780	\$2	854
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	102	12,963	\$1,020,020	\$10,000	\$79	127
Targeted Case Management		T1017		15 minutes	3,085	92,781	\$5,818,963	\$1,886	\$63	30
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	33	1,912	\$216,473	\$6,560	\$113	58
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1	27	\$1,350	\$1,350	\$50	27
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	27	4,013	\$462,386	\$17,125	\$115	149
Assessments		T1023		Encounter	405	507	\$100,492	\$248	\$198	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	1	1	\$111	\$111	\$111	1
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	11	13	\$1,547	\$141	\$119	1
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Detroit-Wayne	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category										
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					11,778		\$36,684,642			

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Genesee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	9	207	\$76,209	\$8,468	\$368	23
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	148	1,487	\$799,848	\$5,404	\$538	10
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	103	1,034	\$284,164	\$2,759	\$275	10
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	515	575	\$94,337	\$183	\$164	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	75	167	\$6,884	\$92	\$41	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	311	1,316	\$81,997	\$264	\$62	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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State of Michigan

Genesee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	- Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	20	50	\$4,606	\$230	\$92	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	3	3	\$276	\$92	\$92	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	19	52	\$5,034	\$265	\$97	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	6	16	\$1,480	\$247	\$92	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	18	137	\$8,905	\$495	\$65	8
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	51	112	\$9,056	\$178	\$81	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	15	140	\$3,616	\$241	\$26	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	492	1,936	\$222,091	\$451	\$115	4

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Genesee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	3	7	\$1,448	\$483	\$207	2
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	8	8	\$1,655	\$207	\$207	1
Occupational Therapy		97004		Encounter	10	32	\$6,620	\$662	\$207	3
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	1	1	\$207	\$207	\$207	1
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	2	6	\$1,241	\$621	\$207	3
Assessment or Health Services		97803		15 Minutes	2	2	\$414	\$207	\$207	1
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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State of Michigan

Genesee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			4	4	\$154	\$39	\$39	1
Additional Codes-Physician Services		99222			27	28	\$1,716	\$64	\$61	1
Additional Codes-Physician Services		99223			1	1	\$77	\$77	\$77	1
Additional Codes-Physician Services		99231			29	94	\$1,900	\$66	\$20	3
Additional Codes-Physician Services		99232			33	96	\$2,812	\$85	\$29	3
Additional Codes-Physician Services		99233			2	2	\$79	\$39	\$39	1
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	2	2	\$108	\$54	\$54	1
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	2	188	\$799	\$400	\$4	94
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			2	2	\$239	\$119	\$119	1
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Genesee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	917	963	\$245,257	\$267	\$255	1
Substance Abuse: Individual Assessment		H0002		Encounter	44	51	\$4,262	\$97	\$84	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	23	464	\$7,330	\$319	\$16	20
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	8	1,562	\$31,363	\$3,920	\$20	195
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	44	701	\$69,843	\$1,587	\$100	16
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	9	216	\$19,295	\$2,144	\$89	24
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	456	493	\$65,659	\$144	\$133	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	71	82	\$9,055	\$128	\$110	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	236	36,080	\$2,427,083	\$10,284	\$67	153
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	2	15	\$1,853	\$926	\$124	8
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	3	4	\$332	\$111	\$83	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	366	3,765	\$140,698	\$384	\$37	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	7	443	\$19,665	\$2,809	\$44	63
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	1	1	\$90	\$90	\$90	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	20	45	\$7,811	\$391	\$174	2
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	4	11	\$3,940	\$985	\$358	3
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	7	7	\$1,323	\$189	\$189	1
Health Services		S9446		Encounter	2	2	\$136	\$68	\$68	1
Health Services		S9470		Encounter	2	2	\$411	\$206	\$206	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	182	1,204	\$167,428	\$920	\$139	7
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$66	\$66	\$66	1
Health Services		T1002		Up to 15 min	12	12	\$1,087	\$91	\$91	1
Respite Care		T1005		15 Minutes	142	118,580	\$363,812	\$2,562	\$3	835
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	458	18,727	\$876,780	\$1,914	\$47	41
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	413	603	\$86,723	\$210	\$144	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	20	35	\$8,740	\$437	\$250	2
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					1	0	\$0	\$0	\$0	0

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Genesee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,580		\$6,178,017			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	5	39	\$33,992	\$6,798	\$872	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	22	22	\$8,712	\$396	\$396	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	2	4	\$214	\$107	\$54	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	21	131	\$22,096	\$1,052	\$169	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	3	8	\$1,120	\$373	\$140	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	2	3	\$312	\$156	\$104	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	24	131	\$11,339	\$472	\$87	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	33	159	\$41,192	\$1,248	\$259	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	4	\$657	\$657	\$164	4
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	1	3	\$492	\$492	\$164	3
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	35	37	\$6,307	\$180	\$170	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	9	162	\$25,630	\$2,848	\$158	18
Assessment		H0031		Encounter	38	41	\$20,188	\$531	\$492	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	15	18	\$6,351	\$423	\$353	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	22	4,146	\$200,708	\$9,123	\$48	188
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	24	135	\$5,571	\$232	\$41	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1	191	\$401	\$401	\$2	191
Community Living Supports (15 Minutes)		H2015		15 Minutes	10	434	\$3,767	\$377	\$9	43
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	3	\$132	\$132	\$44	3
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	5	2,487	\$6,939	\$1,388	\$3	497
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	1	2	\$153	\$153	\$76	2
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	27	1,523	\$70,713	\$2,619	\$46	56
Targeted Case Management		T1017		15 minutes	4	150	\$6,927	\$1,732	\$46	38
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	9	10	\$2,796	\$311	\$280	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					105		\$476,710			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	146	\$39,636	\$19,818	\$271	73
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	5	47	\$31,651	\$6,330	\$673	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	5	31	\$20,876	\$4,175	\$673	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	52	54	\$18,674	\$359	\$346	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	36	98	\$5,881	\$163	\$60	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	119	819	\$96,495	\$811	\$118	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	10	20	\$2,905	\$290	\$145	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	5	5	\$373	\$75	\$75	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	36	231	\$18,406	\$511	\$80	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	20	54	\$6,048	\$302	\$112	3
Therapy-Family Therapy		90847		Encounter	72	493	\$55,236	\$767	\$112	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	19	208	\$11,794	\$621	\$57	11
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	112	362	\$59,658	\$533	\$165	3

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Children with Mental Illness

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Gratiot

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	1	\$87	\$87	\$87	1
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Gratrot	Revenue Code	HPCPS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	190	201	\$50,905	\$268	\$253	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	18	18	\$2,288	\$127	\$127	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	92	6,515	\$324,903	\$3,532	\$50	71
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	22	90	\$9,683	\$440	\$108	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	13	599	\$28,704	\$2,208	\$48	46
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Gratiot

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	1	10	\$921	\$921	\$92	10
Respite		S5150		15 Minutes	6	6,742	\$7,079	\$1,180	\$1	1,124
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	10	87	\$6,381	\$638	\$73	9
Respite Care		T1005		15 Minutes	74	21,724	\$170,968	\$2,310	\$8	294
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	61	1,366	\$53,834	\$883	\$39	22
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	7	7	\$4,560	\$651	\$651	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Gratiot Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					338		\$1,027,945			

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State of Michigan

Hiawatha

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	46	\$10,796	\$5,398	\$235	23
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	12	72	\$49,168	\$4,097	\$683	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	1	1	\$38	\$38	\$38	1
Assessment-Psychiatric Assessment		90801		Encounter	52	53	\$9,945	\$191	\$188	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	117	682	\$179,662	\$1,536	\$263	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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State of Michigan

Hiawatha

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	21	37	\$9,380	\$447	\$254	2
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	336	1,612	\$97,768	\$291	\$61	5

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Hiawatha

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	1	2	\$410	\$410	\$205	2
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Hiawatha

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Hiawatha Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	6	7	\$4,525	\$754	\$646	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	107	108	\$66,009	\$617	\$611	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	47	57	\$20,332	\$433	\$357	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	64	7,189	\$481,275	\$7,520	\$67	112
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	64	547	\$24,882	\$389	\$45	9
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	9	2,250	\$27,374	\$3,042	\$12	250
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Hiawatha

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	81	144	\$2,701	\$33	\$19	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	17	272	\$28,905	\$1,700	\$106	16
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	12	3,468	\$4,335	\$361	\$1	289
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$482	\$482	\$482	1
Health Services		T1002		Up to 15 min	1	3	\$362	\$362	\$121	3
Respite Care		T1005		15 Minutes	11	3,204	\$4,062	\$369	\$1	291
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	55	407	\$45,413	\$826	\$112	7
Targeted Case Management		T1017		15 minutes	17	231	\$4,365	\$257	\$19	14
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	44	58	\$17,708	\$402	\$305	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					1	0	\$533	\$533	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Children with Mental Illness

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State of Michigan

Hiawatha Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					283		\$1,090,429			

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Huron	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	12	112	\$68,333	\$5,694	\$610	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	8	86	\$62,026	\$7,753	\$721	11
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	44	52	\$16,595	\$377	\$319	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	6	10	\$943	\$157	\$94	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	77	395	\$78,382	\$1,018	\$198	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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State of Michigan

Huron										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	7	7	\$2,122	\$303	\$303	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	1	\$229	\$229	\$229	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	28	92	\$9,287	\$332	\$101	3

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Huron Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	8	38	\$9,745	\$1,218	\$256	5
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	20	20	\$11,644	\$582	\$582	1
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Huron

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	82	413	\$110,902	\$1,352	\$269	5
Additional Codes-Physician Services		99215		Encounter	14	21	\$10,065	\$719	\$479	2
Additional Codes-Physician Services		99221			1	1	\$96	\$96	\$96	1
Additional Codes-Physician Services		99222			6	7	\$898	\$150	\$128	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			5	31	\$1,392	\$278	\$45	6
Additional Codes-Physician Services		99232			6	30	\$1,347	\$225	\$45	5
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Periodontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	56	60	\$20,037	\$358	\$334	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	25	3,024	\$188,347	\$7,534	\$62	121
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	1	3	\$317	\$317	\$106	3
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	40	249	\$18,947	\$474	\$76	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	1	60	\$360	\$360	\$6	60

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	1	8	\$731	\$731	\$91	8
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	7	3,980	\$7,780	\$1,111	\$2	569
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	39	993	\$53,506	\$1,372	\$54	25
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	15	23	\$7,971	\$531	\$347	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Huron Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					160		\$682,003			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	4	39	\$22,033	\$5,508	\$565	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	71	73	\$37,914	\$534	\$519	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	24	45	\$1,602	\$67	\$36	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	141	831	\$53,397	\$379	\$64	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	5	26	\$2,667	\$533	\$103	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	20	\$1,357	\$1,357	\$68	20
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	74	319	\$11,935	\$161	\$37	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	98	413	\$70,163	\$716	\$170	4

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	22	22	\$4,433	\$201	\$201	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	128	132	\$11,337	\$89	\$86	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	111	119	\$7,938	\$72	\$67	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	122	7,843	\$394,653	\$3,235	\$50	64
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1	124	\$14,476	\$14,476	\$117	124
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	44	330	\$22,947	\$522	\$70	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	20	5,627	\$48,879	\$2,444	\$9	281
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	98	758	\$162,906	\$1,662	\$215	8
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	12	5,311	\$21,713	\$1,809	\$4	443
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	3	90	\$5,041	\$1,680	\$56	30
Targeted Case Management		T1017		15 minutes	48	1,097	\$61,444	\$1,280	\$56	23
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	12	56	\$3,665	\$305	\$65	5
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	13	14	\$6,685	\$514	\$477	1
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					384		\$967,184			

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State of Michigan

Kalamazoo

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	7	532	\$113,778	\$16,254	\$214	76
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	7	\$4,492	\$4,492	\$642	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	45	239	\$207,277	\$4,606	\$867	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	35	119	\$33,471	\$956	\$281	3
Outpatient Partial Hospitalization	0913			Days	1	1	\$291	\$291	\$291	1
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	238	255	\$124,748	\$524	\$489	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	1	11	\$449	\$449	\$41	11
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	218	2,336	\$166,467	\$764	\$71	11
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	3	36	\$4,828	\$1,609	\$134	12
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	10	91	\$10,881	\$1,088	\$120	9
Therapy-Family Therapy		90847		Encounter	27	100	\$8,541	\$316	\$85	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	2	7	\$206	\$103	\$29	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	284	1,142	\$193,804	\$682	\$170	4

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	20	48	\$1,343	\$67	\$28	2
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	2	2	\$168	\$84	\$84	1
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	14	61	\$4,466	\$319	\$73	4
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	26	26	\$3,596	\$138	\$138	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	2	16	\$250	\$125	\$16	8
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	49	3,153	\$50,776	\$1,036	\$16	64
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	22	41	\$5,002	\$227	\$122	2
Additional Codes-Physician Services		99215		Encounter	17	36	\$5,994	\$353	\$167	2
Additional Codes-Physician Services		99221			20	20	\$1,368	\$68	\$68	1
Additional Codes-Physician Services		99222			20	20	\$1,368	\$68	\$68	1
Additional Codes-Physician Services		99223			2	2	\$144	\$72	\$72	1
Additional Codes-Physician Services		99231			27	87	\$5,910	\$219	\$68	3
Additional Codes-Physician Services		99232			19	22	\$1,512	\$80	\$69	1
Additional Codes-Physician Services		99233			13	13	\$864	\$66	\$66	1
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	10	10	\$3,360	\$336	\$336	1
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	1	1	\$116	\$116	\$116	1
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	2	149	\$547	\$274	\$4	75
Additional Codes-Transportation		A0427		Refer to code descriptions.	1	1	\$231	\$231	\$231	1
Additional codes - Transportation		A0428			1	1	\$136	\$136	\$136	1
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$432	\$432	\$432	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	8	46	\$13,110	\$1,639	\$285	6
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	506	824	\$146,618	\$290	\$178	2
Assessment		H0031		Encounter	210	224	\$47,014	\$224	\$210	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	4	4	\$248	\$62	\$62	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	231	39,879	\$1,280,153	\$5,542	\$32	173
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	1	153	\$6,402	\$6,402	\$42	153
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	7	20	\$242	\$35	\$12	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	625	6,377	\$524,117	\$839	\$82	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	5	456	\$1,365	\$273	\$3	91
Community Living Supports (15 Minutes)		H2015		15 Minutes	199	65,777	\$760,423	\$3,821	\$12	331
Community Living Supports (Daily)		H2016		Per Diem	3	8	\$0	\$0	\$0	3
Community Living Supports (Daily)		H2016	TF	Per Diem	1	157	\$2,743	\$2,743	\$17	157
Community Living Supports (Daily)		H2016	TG	Per Diem	4	348	\$16,095	\$4,024	\$46	87
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	149	11,852	\$620,608	\$4,165	\$52	80
Wraparound		H2022		Days	29	47	\$153	\$5	\$3	2
Supported Employment Services		H2023		15 minutes	5	250	\$4,194	\$839	\$17	50

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	15	4,865	\$22,185	\$1,479	\$5	324
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	1	350	\$191,636	\$191,636	\$548	350
Respite		S5150		15 Minutes	11	12,473	\$7,543	\$686	\$1	1,134
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	302	1,338	\$146,876	\$486	\$110	4
Respite Care		T1005		15 Minutes	112	137,759	\$550,091	\$4,912	\$4	1,230
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	1	71	\$276,000	\$276,000	\$3,887	71
Targeted Case Management		T1017		15 minutes	62	3,263	\$287,441	\$4,636	\$88	53
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	6	513	\$246	\$41	\$0	86
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	113	152	\$3,411	\$30	\$22	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,474		\$5,865,730			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	27	278	\$152,454	\$5,646	\$548	10
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	2	10	\$2,356	\$1,178	\$236	5
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment -Psychiatric Assessment		90801		Encounter	58	63	\$19,632	\$338	\$312	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment -Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	10	12	\$1,023	\$102	\$85	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	80	651	\$100,790	\$1,260	\$155	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	3	6	\$1,394	\$465	\$232	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	19	99	\$16,148	\$850	\$163	5
Therapy-Family Therapy		90847		Encounter	27	131	\$22,257	\$824	\$170	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	65	228	\$37,316	\$574	\$164	4

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	2	\$1,048	\$1,048	\$524	2
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	1	10	\$2,570	\$2,570	\$257	10
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	99	105	\$19,838	\$200	\$189	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	63	91	\$19,648	\$312	\$216	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	18	2,640	\$149,085	\$8,283	\$56	147
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	3	\$2,044	\$2,044	\$681	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	5	31	\$1,315	\$263	\$42	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	3	1,016	\$2,514	\$838	\$2	339
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	19	14,373	\$35,547	\$1,871	\$2	756
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	51	1,686	\$116,430	\$2,283	\$69	33
Targeted Case Management		T1017		15 minutes	37	1,040	\$79,793	\$2,157	\$77	28
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	27	35	\$8,988	\$333	\$257	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	31	146	\$8,657	\$279	\$59	5
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Children with Mental Illness

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State of Michigan

Lapeer

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					152		\$800,847			

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	76	\$17,969	\$5,990	\$236	25
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	3	51	\$30,851	\$10,284	\$605	17
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	13	76	\$57,701	\$4,439	\$759	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	55	56	\$21,450	\$390	\$383	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	2	2	\$75	\$38	\$38	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	41	368	\$27,048	\$660	\$74	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	4	9	\$1,979	\$495	\$220	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	17	138	\$20,286	\$1,193	\$147	8
Therapy-Family Therapy		90847		Encounter	28	463	\$68,061	\$2,431	\$147	17
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	202	762	\$116,746	\$578	\$153	4

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Lenawee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			1	1	\$75	\$75	\$75	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			1	1	\$45	\$45	\$45	1
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	212	323	\$142,240	\$671	\$440	2
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	82	83	\$15,968	\$195	\$192	1
Substance Abuse: Pharnalological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	36	5,039	\$125,521	\$3,487	\$25	140
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	28	117	\$7,360	\$263	\$63	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	49	16,955	\$49,678	\$1,014	\$3	346
Community Living Supports (15 Minutes)		H2015		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	48	1,236	\$130,892	\$2,727	\$106	26
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Lenawee

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	8	6,780	\$18,742	\$2,343	\$3	848
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	164	378	\$6,301	\$38	\$17	2
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	10	94	\$14,182	\$1,418	\$151	9
Targeted Case Management		T1017		15 minutes	129	1,325	\$158,960	\$1,232	\$120	10
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	31	35	\$11,009	\$355	\$315	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					345		\$1,043,139			

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Lifeways										
Service Category	Revenue Code	HCPSC Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	78	1,155	\$610,494	\$7,827	\$529	15
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	166	170	\$17,991	\$108	\$106	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	31	43	\$2,295	\$74	\$53	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	184	1,265	\$122,098	\$664	\$97	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Lifeways										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	17	44	\$4,128	\$243	\$94	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	70	556	\$24,442	\$349	\$44	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	173	582	\$68,518	\$396	\$118	3

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State of Michigan

Lifeways										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	5	20	\$1,898	\$380	\$95	4
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Lifeways

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	4	518	\$2,202	\$550	\$4	130
Additional Codes-Transportation		A0427		Refer to code descriptions.	4	4	\$834	\$209	\$209	1
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	812	850	\$251,449	\$310	\$296	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	356	410	\$43,733	\$123	\$107	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	16	34	\$1,438	\$90	\$42	2
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	18,225	\$794,501	\$0	\$44	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	10	10	\$558	\$56	\$56	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	195	876	\$28,604	\$147	\$33	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	195	21,975	\$159,814	\$820	\$7	113
Community Living Supports (Daily)		H2016		Per Diem	3	424	\$109,191	\$36,397	\$258	141
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Lifeways										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	10	10	\$915	\$91	\$91	1
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	14	374	\$28,050	\$2,004	\$75	27
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	45	111	\$12,308	\$274	\$111	2
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	24	7,163	\$104,668	\$4,361	\$15	298
Respite Care		T1005	TD	15 Minutes	0	0	\$15	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	24	996	\$80,713	\$3,363	\$81	42
Targeted Case Management		T1017		15 minutes	30	1,197	\$42,403	\$1,413	\$35	40
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$76	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	51	52	\$8,040	\$158	\$155	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	7	11	\$587	\$84	\$53	2
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	2	52	\$1,510	\$755	\$29	26
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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State of Michigan

Lifeways										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,282		\$2,523,472			

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State of Michigan

Livingston Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	156	\$36,495	\$9,124	\$234	39
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	7	63	\$48,332	\$6,905	\$767	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	12	134	\$102,801	\$8,567	\$767	11
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	67	69	\$20,220	\$302	\$293	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	26	38	\$3,372	\$130	\$89	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	91	533	\$86,914	\$955	\$163	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	6	11	\$3,329	\$555	\$303	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	1	30	\$5,007	\$5,007	\$167	30
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	33	81	\$7,212	\$219	\$89	2
Therapy-Family Therapy		90847		Encounter	103	603	\$85,554	\$831	\$142	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	1	46	\$5,368	\$5,368	\$117	46
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	149	695	\$88,020	\$591	\$127	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	2	2	\$384	\$192	\$192	1
Speech & Language Therapy		92507		Encounter	1	2	\$292	\$292	\$146	2
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	1	\$137	\$137	\$137	1
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$385	\$385	\$385	1
Occupational Therapy		97004		Encounter	1	2	\$479	\$479	\$239	2
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	2	46	\$699	\$350	\$15	23
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762		0	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	127	137	\$74,853	\$589	\$546	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	26	135	\$22,985	\$884	\$170	5
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	118	11,361	\$636,670	\$5,396	\$56	96
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	26	107	\$4,173	\$161	\$39	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	1	2,900	\$8,990	\$8,990	\$3	2,900
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	1	109	\$20,713	\$20,713	\$190	109
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	39	1,838	\$211,646	\$5,427	\$115	47
Wraparound		H2022		Days	9	202	\$90,104	\$10,012	\$446	22
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	8	\$343	\$343	\$43	8
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	1	42	\$12,287	\$12,287	\$293	42
Respite		S5150		15 Minutes	20	22,880	\$48,506	\$2,425	\$2	1,144
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	2	2	\$224	\$112	\$112	1
Respite Care		T1005		15 Minutes	40	9,927	\$91,328	\$2,283	\$9	248
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	10	157	\$16,202	\$1,620	\$103	16
Targeted Case Management		T1017		15 minutes	47	619	\$55,877	\$1,189	\$90	13
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	28	36	\$4,480	\$160	\$124	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					315		\$1,794,380			

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Macomb

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	19	2,446	\$545,931	\$28,733	\$223	129
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	379	3,181	\$1,084,453	\$2,861	\$341	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	204	531	\$102,732	\$504	\$193	3
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	787	1,114	\$302,212	\$384	\$271	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	224	524	\$52,857	\$236	\$101	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	844	5,037	\$506,320	\$600	\$101	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0

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Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	13	13	\$3,804	\$293	\$293	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	71	130	\$22,773	\$321	\$175	2
Therapy-Family Therapy		90847		Encounter	330	1,398	\$263,518	\$799	\$188	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	63	420	\$24,342	\$386	\$58	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	916	4,366	\$335,696	\$366	\$77	5

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Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	9	20	\$5,057	\$562	\$253	2
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	2	2	\$109	\$55	\$55	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

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Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridental, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	260	310	\$72,440	\$279	\$234	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	622	940	\$111,800	\$180	\$119	2
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	26	43	\$4,233	\$163	\$98	2
Home Based Services		H0036		15 Minutes	94	15,953	\$571,498	\$6,080	\$36	170
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	42	436	\$75,932	\$1,808	\$174	10
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	36	168	\$29,908	\$831	\$178	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	7	5,338	\$40,231	\$5,747	\$8	763
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	37	5,454	\$968,245	\$26,169	\$178	147
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	28	542	\$21,686	\$775	\$40	19
Wraparound		H2022		Days	35	101	\$39,003	\$1,114	\$386	3
Supported Employment Services		H2023		15 minutes	0	0	\$0	\$0	\$0	0

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Macomb Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	3	\$642	\$642	\$214	3
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	128	82,884	\$165,913	\$1,296	\$2	648
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	4	13	\$1,033	\$258	\$79	3
Respite Care		T1005		15 Minutes	4	4,972	\$37,473	\$9,368	\$8	1,243
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	1	2	\$242	\$242	\$121	2
Targeted Case Management		T1017		15 minutes	188	2,468	\$264,975	\$1,409	\$107	13
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	37	5,454	\$330,331	\$8,928	\$61	147
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					1,399		\$5,985,389			