

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Manistee-Benzie 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	2	8	\$3,522	\$1,761	\$440	4
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	19	\$8,365	\$2,091	\$440	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	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	131	162	\$61,866	\$472	\$382	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	12	33	\$2,436	\$203	\$74	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	25	44	\$16,586	\$663	\$377	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	78	418	\$53,797	\$690	\$129	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	10	11	\$6,510	\$651	\$592	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	4	4	\$785	\$196	\$196	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	1	1	\$75	\$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	2	26	\$1,948	\$974	\$75	13
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	1	1	\$228	\$228	\$228	1
Therapy-Family Therapy		90847		Encounter	6	24	\$2,428	\$405	\$101	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	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	3	110	\$15,225	\$5,075	\$138	37
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	67	341	\$68,292	\$1,019	\$200	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	1	\$107	\$107	\$107	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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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	1	1	\$215	\$215	\$215	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	132	3,933	\$356,215	\$2,699	\$91	30
Assessment		H0031		Encounter	10	11	\$1,587	\$159	\$144	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	25	30	\$5,569	\$223	\$186	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	29	4,481	\$251,192	\$8,662	\$56	155
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	60	\$7,364	\$307	\$123	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1	37	\$540	\$540	\$15	37
Community Living Supports (15 Minutes)		H2015		15 Minutes	4	325	\$3,443	\$861	\$11	81
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	9	1,170	\$19,583	\$2,176	\$17	130
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	32	5,967	\$196,995	\$6,156	\$33	186

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Manistee-Benzie 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	1	1	\$136	\$136	\$136	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	5	5	\$609	\$122	\$122	1
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	16	16	\$9,955	\$622	\$622	1
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$189	\$189	\$189	1
Health Services		T1002		Up to 15 min	6	6	\$1,050	\$175	\$175	1
Respite Care		T1005		15 Minutes	15	13,579	\$28,241	\$1,883	\$2	905
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	103	3,239	\$146,646	\$1,424	\$45	31
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	21	22	\$26,681	\$1,271	\$1,213	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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Manistee-Benzie 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					355		\$1,298,379			

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Monroe

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	24	\$4,636	\$1,159	\$193	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	5	48	\$33,798	\$6,760	\$704	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	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	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90801		Encounter	94	94	\$24,050	\$256	\$256	1
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	31	64	\$1,900	\$61	\$30	2
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	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	70	310	\$19,809	\$283	\$64	4

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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	4	10	\$2,067	\$517	\$207	3
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	3	15	\$1,336	\$445	\$89	5
Therapy-Family Therapy		90847		Encounter	26	70	\$6,234	\$240	\$89	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	184	1,058	\$279,450	\$1,519	\$264	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	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	4	4	\$1,657	\$414	\$414	1
Occupational Therapy		97004		Encounter	4	26	\$9,721	\$2,430	\$374	7
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
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	30	31	\$12,772	\$426	\$412	1
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	154	200	\$72,854	\$473	\$364	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	19	19	\$6,756	\$356	\$356	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	80	11,034	\$462,987	\$5,787	\$42	138
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	21	261	\$8,639	\$411	\$33	12
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1	48	\$180	\$180	\$4	48
Community Living Supports (15 Minutes)		H2015		15 Minutes	27	16,899	\$57,119	\$2,116	\$3	626
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	4	66	\$26,933	\$6,733	\$408	17
Wraparound		H2022		Days	11	48	\$19,587	\$1,781	\$408	4
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	2	\$297	\$297	\$148	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	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
Respite Care		T1005		15 Minutes	45	31,236	\$230,834	\$5,130	\$7	694
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	24	311	\$89,186	\$3,716	\$287	13
Targeted Case Management		T1017		15 minutes	131	4,127	\$270,153	\$2,062	\$65	32
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	3	92	\$6,022	\$2,007	\$65	31
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	46	50	\$18,213	\$396	\$364	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	5	17	\$5,091	\$1,018	\$299	3
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					304		\$1,672,281			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	105	\$22,000	\$22,000	\$210	105
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	143	\$101,613	\$8,468	\$711	12
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	44	44	\$16,690	\$379	\$379	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	8	8	\$898	\$112	\$112	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	60	309	\$46,401	\$773	\$150	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	4	6	\$1,811	\$453	\$302	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	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	45	98	\$15,320	\$340	\$156	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	9	36	\$1,407	\$156	\$39	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	69	257	\$32,308	\$468	\$126	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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Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Montcalm

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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Montcalm

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	113	121	\$40,743	\$361	\$337	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	61	68	\$4,549	\$75	\$67	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	11	46	\$2,437	\$222	\$53	4
Home Based Services		H0036		15 Minutes	98	14,506	\$331,008	\$3,378	\$23	148
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	31	103	\$5,271	\$170	\$51	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	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

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Montcalm

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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	\$128	\$128	\$128	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	2	2	\$463	\$232	\$232	1
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	1	1	\$373	\$373	\$373	1
Health Services		T1002		Up to 15 min	1	4	\$212	\$212	\$53	4
Respite Care		T1005		15 Minutes	36	16,081	\$87,093	\$2,419	\$5	447
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	46	733	\$51,338	\$1,116	\$70	16
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	48	59	\$22,382	\$466	\$379	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					277		\$784,445			

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State of Michigan

Muskegon

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	99	258	\$36,379	\$367	\$141	3
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	382	3,069	\$446,912	\$1,170	\$146	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	5	16	\$811	\$162	\$51	3
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	272	899	\$115,594	\$425	\$129	3
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	18	25	\$3,399	\$189	\$136	1
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	0	0	\$0	\$0	\$0	0
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	0	0	\$0	\$0	\$0	0
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	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	2	2	\$851	\$425	\$425	1
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	168	170	\$72,311	\$430	\$425	1
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	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	0	0	\$0	\$0	\$0	0

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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	3	442	\$99,299	\$33,100	\$225	147
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	10	59	\$28,416	\$2,842	\$482	6
Speech & Language Therapy		92610		Encounter	19	98	\$56,829	\$2,991	\$580	5
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	2	7	\$1,983	\$992	\$283	4
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	221	228	\$47,777	\$216	\$210	1
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	56	107	\$7,463	\$133	\$70	2
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			187	636	\$73,117	\$391	\$115	3
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	15	21	\$5,677	\$378	\$270	1
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	14	14	\$1,494	\$107	\$107	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	67	147	\$19,037	\$284	\$130	2
Assessment		H0031		Encounter	78	80	\$9,468	\$121	\$118	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	17	34	\$4,639	\$273	\$136	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	63	3,178	\$303,480	\$4,817	\$95	50
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	6	13	\$2,758	\$460	\$212	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	39	211	\$14,018	\$359	\$66	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	2	112	\$466	\$233	\$4	56
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

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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	57	27,370	\$26,028	\$457	\$1	480
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	300	911	\$76,509	\$255	\$84	3
Respite Care		T1005		15 Minutes	24	7,733	\$8,823	\$368	\$1	322
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	108	3,022	\$239,703	\$2,219	\$79	28
Targeted Case Management		T1017		15 minutes	0	0	\$0	\$0	\$0	0
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	58	69	\$29,256	\$504	\$424	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	5	9	\$561	\$112	\$62	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	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	4	4	\$2,215	\$554	\$554	1
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	\$3,018	\$3,018	\$0	0

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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					578		\$1,738,290			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	5	466	\$83,740	\$16,748	\$180	93
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	130	806	\$636,845	\$4,899	\$790	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	8	\$15,645	\$15,645	\$1,956	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	53	227	\$67,771	\$1,279	\$299	4
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	206	268	\$72,974	\$354	\$272	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	34	117	\$10,751	\$316	\$92	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	1	2	\$220	\$220	\$110	2
Therapy-Individual Therapy		90805		Encounter 20-30 Min	1	11	\$1,151	\$1,151	\$105	11
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	462	3,333	\$319,287	\$691	\$96	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	48	287	\$26,716	\$557	\$93	6

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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	11	11	\$1,910	\$174	\$174	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	1	1	\$130	\$130	\$130	1
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	10	18	\$2,783	\$278	\$155	2
Therapy-Family Therapy		90847		Encounter	94	349	\$24,240	\$258	\$69	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	3	10	\$456	\$152	\$46	3
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	5	\$311	\$156	\$62	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	2	9	\$1,123	\$562	\$125	5
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	849	\$76,106	\$227	\$90	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	5	36	\$2,132	\$426	\$59	7
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	21	226	\$1,107	\$53	\$5	11
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			21	25	\$3,225	\$154	\$129	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
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	22	22	\$2,435	\$111	\$111	1
Assessment		H0002		Encounter	729	1,073	\$574,965	\$789	\$536	1
Substance Abuse: Individual Assessment		H0002		Encounter	121	145	\$77,698	\$642	\$536	1
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	75	1,051	\$109,440	\$1,459	\$104	14
Crisis Residential Services		H0018		Days	62	516	\$158,252	\$2,552	\$307	8
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	23	1,130	\$274,860	\$11,950	\$243	49
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	367	3,364	\$603,858	\$1,645	\$180	9
Assessment		H0031		Encounter	173	177	\$14,251	\$82	\$81	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	157	20,476	\$539,489	\$3,436	\$26	130
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	1	42	\$0	\$0	\$0	42
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	4	\$786	\$786	\$197	4
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	1	4	\$0	\$0	\$0	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	19	3,979	\$16,071	\$846	\$4	209
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	2	117	\$4,860	\$2,430	\$42	59
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

Network180

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	30	510	\$71,632	\$2,388	\$140	17
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	24	3,751	\$787,760	\$32,823	\$210	156
Respite		S5150		15 Minutes	0	0	\$103,716	\$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	1	1	\$127	\$127	\$127	1
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
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	1	14	\$1,505	\$1,505	\$108	14
Targeted Case Management		T1017		15 minutes	752	49,064	\$1,823,612	\$2,425	\$37	65
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	151	273	\$73,143	\$484	\$268	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	\$8,974	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category

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State of Michigan

Network180										
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					2,072		\$6,596,057			

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Newaygo

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	\$1,339	\$1,339	\$223	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	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	14	109	\$75,212	\$5,372	\$690	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	1	14	\$753	\$753	\$54	14
Assessment-Psychiatric Assessment		90801		Encounter	75	75	\$17,104	\$228	\$228	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	62	255	\$13,500	\$218	\$53	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	82	235	\$29,751	\$363	\$127	3
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	11	18	\$3,460	\$315	\$192	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	1	1	\$63	\$63	\$63	1
Therapy-Family Therapy		90847		Encounter	87	339	\$44,530	\$512	\$131	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	9	85	\$5,870	\$652	\$69	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	88	407	\$56,693	\$644	\$139	5

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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	23	147	\$18,726	\$814	\$127	6
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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State of Michigan

Newaygo

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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	49	54	\$4,314	\$88	\$80	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	59	503	\$47,262	\$801	\$94	9
Assessment		H0031		Encounter	183	420	\$67,784	\$370	\$161	2
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	121	179	\$26,328	\$218	\$147	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	2	2	\$74	\$37	\$37	1
Home Based Services		H0036		15 Minutes	47	4,559	\$284,650	\$6,056	\$62	97
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	2	5	\$608	\$304	\$122	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	20	50	\$3,280	\$164	\$66	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	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	23	254	\$5,042	\$219	\$20	11
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	95	661	\$64,850	\$683	\$98	7
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	7	9	\$1,471	\$210	\$163	1
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	13	13	\$2,918	\$224	\$224	1
Health Services		T1002		Up to 15 min	96	458	\$17,595	\$183	\$38	5
Respite Care		T1005		15 Minutes	31	27,987	\$28,528	\$920	\$1	903
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	96	3,069	\$209,350	\$2,181	\$68	32
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	18	66	\$12,962	\$720	\$196	4
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		0	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	0
Transportation		T2005		0	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	23	221	\$13,140	\$571	\$59	10
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	8	8	\$6,203	\$775	\$775	1
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				0	0	\$0	\$0	\$0	\$0	0
Other				0	0	\$0	\$0	\$0	\$0	0

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Newaygo										
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Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					255		\$1,063,357			

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North Country										
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	525	\$119,345	\$59,673	\$227	263
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	36	353	\$217,681	\$6,047	\$617	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	59	507	\$317,752	\$5,386	\$627	9
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	\$74	\$74	\$74	1
Assessment-Psychiatric Assessment	90801			Encounter	159	162	\$50,154	\$315	\$310	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	80	133	\$8,932	\$112	\$67	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	4	8	\$992	\$248	\$124	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	390	1,605	\$195,354	\$501	\$122	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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Therapy-Individual Therapy		90807		Encounter 45-50 Min	1	1	\$205	\$205	\$205	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	6	6	\$1,080	\$180	\$180	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	16	28	\$1,729	\$108	\$62	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	111	526	\$62,709	\$565	\$119	5
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	123	\$14,616	\$203	\$119	2
Therapy-Family Therapy		90847		Encounter	277	883	\$101,910	\$368	\$115	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	2	56	\$4,194	\$2,097	\$75	28
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	280	1,027	\$101,895	\$364	\$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	1	3	\$471	\$471	\$157	3
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	2	2	\$314	\$157	\$157	1
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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State of Michigan

North Country										
Service Category	Revenue Code	HCPSC 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			1	4	\$155	\$155	\$39	4
Additional Codes-Physician Services		99222			18	19	\$1,401	\$78	\$74	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			19	62	\$1,575	\$83	\$25	3
Additional Codes-Physician Services		99232			17	53	\$1,848	\$109	\$35	3
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	2	2	\$230	\$115	\$115	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			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	1	18	\$819	\$819	\$46	18
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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North Country										
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	67	68	\$9,767	\$146	\$144	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	692	716	\$159,041	\$230	\$222	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	613	844	\$152,273	\$248	\$180	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	12	14	\$782	\$65	\$56	1
Home Based Services		H0036		15 Minutes	66	8,006	\$424,692	\$6,435	\$53	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	3	8	\$571	\$190	\$71	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	107	465	\$17,593	\$164	\$38	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	1	3	\$793	\$793	\$264	3
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	6	125	\$34,142	\$5,690	\$273	21
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	129	225	\$20,585	\$160	\$91	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	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	7	1,386	\$301,276	\$43,039	\$217	198
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	39	35,046	\$52,614	\$1,349	\$2	899
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	1	1	\$214	\$214	\$214	1
Health Services		S9446		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9470		Encounter	2	2	\$410	\$205	\$205	1
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	51	51	\$12,814	\$251	\$251	1
Health Services		T1002		Up to 15 min	3	4	\$202	\$67	\$51	1
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	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		15 minutes	82	2,922	\$157,738	\$1,924	\$54	36
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	54	\$7,146	\$162	\$132	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	1	11	\$113	\$113	\$10	11
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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North Country										
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					943		\$2,558,246			

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State of Michigan

Northeast 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	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	1	6	\$5,466	\$5,466	\$911	6
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	107	107	\$29,039	\$271	\$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	12	27	\$986	\$82	\$37	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	1	1	\$94	\$94	\$94	1
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	45	147	\$9,038	\$201	\$61	3
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	\$80	\$80	\$80	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	2	7	\$362	\$181	\$52	4
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	1	3	\$188	\$188	\$63	3
Therapy-Family Therapy		90847		Encounter	14	34	\$2,269	\$162	\$67	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	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	248	616	\$66,960	\$270	\$109	2

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Northeast Michigan

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	1	1	\$109	\$109	\$109	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	75	83	\$11,608	\$155	\$140	1
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	2	2	\$221	\$110	\$110	1
Additional Codes-Physician Services		99203		Encounter	3	3	\$558	\$186	\$186	1
Additional Codes-Physician Services		99204		Encounter	1	1	\$262	\$262	\$262	1
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	2	2	\$116	\$58	\$58	1
Additional Codes-Physician Services		99213		Encounter	3	3	\$349	\$116	\$116	1

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Children with Mental Illness

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State of Michigan

Northeast Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	8	8	\$1,488	\$186	\$186	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	2	2	\$709	\$355	\$355	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	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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State of Michigan

Northeast 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
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	12	14	\$2,166	\$180	\$155	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	161	163	\$26,859	\$167	\$165	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	55	84	\$4,114	\$75	\$49	2
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	82	4,649	\$265,506	\$3,238	\$57	57
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	66	281	\$5,355	\$81	\$19	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	1	315	\$1,310	\$1,310	\$4	315
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

Northeast 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	1	3	\$174	\$174	\$58	3
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	26	26	\$2,948	\$113	\$113	1
Health Services		T1002		Up to 15 min	2	17	\$850	\$425	\$50	9
Respite Care		T1005		15 Minutes	5	1,976	\$2,257	\$451	\$1	395
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	\$218	\$218	\$109	2
Targeted Case Management		T1017		15 minutes	101	3,920	\$228,050	\$2,258	\$58	39
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	315	\$3,926	\$3,926	\$12	315
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	47	50	\$3,981	\$85	\$80	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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State of Michigan

Northeast Michigan

Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			1	0	\$11	\$11	\$0	0
Total Population and Cost					398		\$677,629			

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State of Michigan

Northern Lakes										
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	7	42	\$29,325	\$4,189	\$698	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	49	318	\$222,034	\$4,531	\$698	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	678	893	\$246,155	\$363	\$276	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	81	\$6,915	\$157	\$85	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	14	18	\$1,907	\$136	\$106	1
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	351	1,500	\$234,510	\$668	\$156	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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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	27	37	\$8,334	\$309	\$225	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	3	13	\$2,086	\$695	\$160	4
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	60	120	\$18,268	\$304	\$152	2
Therapy-Family Therapy		90847		Encounter	457	1,838	\$270,333	\$592	\$147	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	3	10	\$1,008	\$336	\$101	3
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	391	1,932	\$240,457	\$615	\$124	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	4	7	\$943	\$236	\$135	2
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	5	\$648	\$324	\$130	3
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	1	6	\$1,129	\$1,129	\$188	6
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	10	10	\$1,368	\$137	\$137	1
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	14	50	\$11,674	\$834	\$233	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	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	184	201	\$31,631	\$172	\$157	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	576	877	\$203,859	\$354	\$232	2
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	133	16,301	\$787,990	\$5,925	\$48	123
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	13	95	\$20,324	\$1,563	\$214	7
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	4	5	\$1,270	\$318	\$254	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	127	1,431	\$113,335	\$892	\$79	11
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1	428	\$1,288	\$1,288	\$3	428
Community Living Supports (15 Minutes)		H2015		15 Minutes	1	33	\$155	\$155	\$5	33
Community Living Supports (Daily)		H2016		Per Diem	2	91	\$2,808	\$1,404	\$31	46
Community Living Supports (Daily)		H2016	TF	Per Diem	6	1,168	\$69,683	\$11,614	\$60	195
Community Living Supports (Daily)		H2016	TG	Per Diem	3	442	\$52,280	\$17,427	\$118	147
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	23	619	\$29,922	\$1,301	\$48	27
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

Northern Lakes										
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	18	18	\$1,814	\$101	\$101	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	75	273	\$49,981	\$666	\$183	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	99	67,803	\$59,667	\$603	\$1	685
Respite		S5151		Per Diem	13	63	\$14,062	\$1,082	\$223	5
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	6	6	\$944	\$157	\$157	1
Health Services		T1002		Up to 15 min	83	157	\$8,558	\$103	\$55	2
Respite Care		T1005		15 Minutes	75	43,637	\$120,002	\$1,600	\$3	582
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	19	\$1,270	\$635	\$67	10
Targeted Case Management		T1017		15 minutes	300	5,377	\$298,639	\$995	\$56	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	6	1,287	\$39,717	\$6,619	\$31	215
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	3	410	\$26,146	\$8,715	\$64	137
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	34	41	\$9,699	\$285	\$237	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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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					986		\$3,242,139			

CMHSP Cost Data by Service Category

Children with Mental Illness

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State of Michigan

Northpointe 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	51	\$8,925	\$8,925	\$175	51
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	14	130	\$88,128	\$6,295	\$678	9
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	16	\$6,230	\$6,230	\$389	16
Assessment-Psychiatric Assessment		90801		Encounter	68	68	\$9,761	\$144	\$144	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	27	126	\$6,269	\$232	\$50	5
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	3	10	\$457	\$152	\$46	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	41	173	\$17,203	\$420	\$99	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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Northpointe	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	5	7	\$1,044	\$209	\$149	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	24	53	\$5,270	\$220	\$99	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	10	118	\$17,601	\$1,760	\$149	12
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	82	266	\$36,495	\$445	\$137	3

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Northpointe

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	7	7	\$2,518	\$360	\$360	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	1	6	\$593	\$593	\$99	6
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	4	12	\$1,185	\$296	\$99	3
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	4	17	\$1,679	\$420	\$99	4
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	10	\$326	\$163	\$33	5
Assessment or Health Services		97803		15 Minutes	1	4	\$131	\$131	\$33	4
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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Northpointe

Service Category	Revenue Code	HCPDS 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	HCPDS 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	12	83	\$12,380	\$1,032	\$149	7
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	110	117	\$17,452	\$159	\$149	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	53	53	\$37,620	\$710	\$710	1
Assessment		H0031		Encounter	80	89	\$14,021	\$175	\$158	1
Substance Abuse: Assessment		H0031		Encounter	5	5	\$0	\$0	\$0	1
Treatment Planning		H0032		Encounter	124	183	\$27,296	\$220	\$149	1
Substance Abuse: Pharamlogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	5	9	\$549	\$110	\$61	2
Home Based Services		H0036		15 Minutes	19	3,306	\$188,150	\$9,903	\$57	174
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	2	33	\$2,404	\$1,202	\$73	17
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	2	\$574	\$574	\$287	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	68	355	\$26,513	\$390	\$75	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	9	2,123	\$7,218	\$802	\$3	236
Community Living Supports (15 Minutes)		H2015		15 Minutes	7	368	\$4,468	\$638	\$12	53
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	6	1,637	\$268,631	\$44,772	\$164	273
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	13	1,168	\$50,995	\$3,923	\$44	90
Wraparound		H2022		Days	6	16	\$5,668	\$945	\$354	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	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	2	\$732	\$732	\$366	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	7	98	\$2,436	\$348	\$25	14
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	2	660	\$642	\$321	\$1	330
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	5	6	\$823	\$165	\$137	1
Health Services		T1002		Up to 15 min	0	0	\$0	\$0	\$0	0
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	12	27	\$4,027	\$336	\$149	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	99	3,143	\$153,316	\$1,549	\$49	32
Targeted Case Management		T1017		15 minutes	8	140	\$6,579	\$822	\$47	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	6	1,637	\$9,199	\$1,533	\$6	273
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	60	91	\$14,584	\$243	\$160	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	2	5	\$571	\$286	\$114	3
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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Northpointe Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Aggregate for 'J' Codes		ALL			1	0	\$5,216	\$5,216	\$0	0
Total Population and Cost					313		\$1,065,880			

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Oakland										
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	5	359	\$83,068	\$16,614	\$231	72
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	195	2,342	\$1,083,404	\$5,556	\$463	12
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	22	359	\$137,113	\$6,232	\$382	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	87	951	\$126,187	\$1,450	\$133	11
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	4	5	\$455	\$114	\$91	1
Assessment-Psychiatric Assessment		90801		Encounter	816	1,015	\$445,291	\$546	\$439	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	491	2,300	\$220,869	\$450	\$96	5
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	381	1,895	\$339,451	\$891	\$179	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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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	77	134	\$35,948	\$467	\$268	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	411	1,367	\$164,792	\$401	\$121	3
Therapy-Family Therapy		90847		Encounter	674	5,279	\$810,327	\$1,202	\$154	8
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	144	\$13,656	\$441	\$95	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	672	3,152	\$642,724	\$956	\$204	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	3	7	\$2,088	\$696	\$298	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	1	1	\$100	\$100	\$100	1
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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State of Michigan

Oakland

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.	11	11	\$3,659	\$333	\$333	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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Oakland										
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	19	92	\$23,253	\$1,224	\$253	5
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	123	309	\$80,609	\$655	\$261	3
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	1	13	\$4,016	\$4,016	\$309	13
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	909	1,020	\$310,131	\$341	\$304	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	742	1,931	\$417,733	\$563	\$216	3
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	422	44,655	\$2,257,757	\$5,350	\$51	106
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	6	19	\$987	\$165	\$52	3
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	140	1,999	\$364,798	\$2,606	\$182	14
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	2	2	\$486	\$243	\$243	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	458	1,699	\$213,411	\$466	\$126	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	64	11,617	\$48,791	\$762	\$4	182
Community Living Supports (15 Minutes)		H2015		15 Minutes	5	1,550	\$6,057	\$1,211	\$4	310
Community Living Supports (Daily)		H2016		Per Diem	4	74	\$3,735	\$934	\$50	19
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	3	145	\$11,860	\$3,953	\$82	48
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	78	1,980	\$376,913	\$4,832	\$190	25
Wraparound		H2022		Days	119	1,005	\$245,481	\$2,063	\$244	8
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	2	28	\$198	\$99	\$7	14
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	1	8	\$144	\$144	\$18	8
Family Training		S5111		Encounter	97	583	\$211,495	\$2,180	\$363	6
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	16	1,807	\$596,418	\$37,276	\$330	113
Respite		S5150		15 Minutes	39	20,200	\$75,144	\$1,927	\$4	518
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	1	1	\$52	\$52	\$52	1
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	1	13	\$286	\$286	\$22	13
Assessment		T1001		Encounter	1	1	\$226	\$226	\$226	1
Health Services		T1002		Up to 15 min	10	27	\$1,543	\$154	\$57	3
Respite Care		T1005		15 Minutes	47	3,683	\$19,115	\$407	\$5	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	1	3	\$342	\$342	\$114	3
Supports Coordination/Wrap Facilitation		T1016		15 minutes	9	426	\$4,361	\$485	\$10	47
Targeted Case Management		T1017		15 minutes	189	3,377	\$276,002	\$1,460	\$82	18
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	6	\$339	\$339	\$57	6
Personal Care in Licensed Specialized Residential Setting		T1020		Days	3	145	\$5,662	\$1,887	\$39	48
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	400	710	\$113,332	\$283	\$160	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	4	10	\$3,130	\$783	\$313	3
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$2,884	\$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					1,928		\$9,785,823			

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State of Michigan

Ottawa

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	23	151	\$101,851	\$4,428	\$675	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	4	34	\$8,641	\$2,160	\$254	9
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	74	77	\$27,029	\$365	\$351	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	1	\$50	\$50	\$50	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	141	931	\$77,595	\$550	\$83	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	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	10	12	\$952	\$95	\$79	1
Therapy-Family Therapy		90847		Encounter	70	316	\$27,931	\$399	\$88	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	1	2	\$277	\$277	\$139	2
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	374	\$63,488	\$567	\$170	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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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
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	1	1	\$336	\$336	\$336	1
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	2	4	\$1,106	\$553	\$276	2
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	207	213	\$33,096	\$160	\$155	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	119	185	\$20,666	\$174	\$112	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	40	2,814	\$207,139	\$5,178	\$74	70
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	38	320	\$18,254	\$480	\$57	8
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	81	338	\$72,329	\$893	\$214	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	6	564	\$2,418	\$403	\$4	94
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	3	163	\$1,097	\$366	\$7	54
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	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	10	52	\$3,151	\$315	\$61	5
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	2	4	\$94	\$47	\$24	2
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	59	21,207	\$36,698	\$622	\$2	359
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	1	3	\$992	\$992	\$331	3
Supports Coordination/Wrap Facilitation		T1016		15 minutes	1	2	\$512	\$512	\$256	2
Targeted Case Management		T1017		15 minutes	27	131	\$6,446	\$239	\$49	5
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	34	40	\$27,181	\$799	\$680	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										
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0
Total Population and Cost					423		\$739,329			

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Pathways 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	306	\$142,100	\$47,367	\$464	102
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	37	281	\$179,559	\$4,853	\$639	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	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90801		Encounter	48	50	\$31,344	\$653	\$627	1
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	72	244	\$36,600	\$508	\$150	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	141	1,138	\$245,967	\$1,744	\$216	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	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	29	72	\$16,254	\$560	\$226	2
Therapy-Family Therapy		90847		Encounter	109	544	\$106,575	\$978	\$196	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	21	214	\$17,099	\$814	\$80	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	113	478	\$148,333	\$1,313	\$310	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	2	2	\$1,180	\$590	\$590	1
Speech & Language Therapy		92507		Encounter	3	3	\$910	\$303	\$303	1
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	20	\$6,708	\$3,354	\$335	10
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	\$670	\$670	\$670	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	1	4	\$552	\$552	\$138	4
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$150	\$150	\$150	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	2	7	\$37	\$19	\$5	4
Prevention Services - Direct Model		H0025		Face to Face Contact	1	1	\$157	\$157	\$157	1
Assessment		H0031		Encounter	136	146	\$39,659	\$292	\$272	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	185	220	\$90,356	\$488	\$411	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	3	5	\$626	\$209	\$125	2
Home Based Services		H0036		15 Minutes	18	3,396	\$777,039	\$43,169	\$229	189
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	3	6	\$2,400	\$800	\$400	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	170	1,414	\$97,538	\$574	\$69	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	11	2,148	\$25,303	\$2,300	\$12	195
Community Living Supports (15 Minutes)		H2015		15 Minutes	13	632	\$3,792	\$292	\$6	49
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	4	1,001	\$207,017	\$51,754	\$207	250
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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Pathways	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	1	1	\$174	\$174	\$174	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	1	12	\$923	\$923	\$77	12
Family Training		S5111		Encounter	95	614	\$47,210	\$497	\$77	6
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	6	1,246	\$80,242	\$13,374	\$64	208
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	1	2	\$842	\$842	\$421	2
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	3	\$458	\$229	\$153	2
Respite Care		T1005		15 Minutes	10	3,961	\$33,074	\$3,307	\$8	396
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	1	2	\$272	\$272	\$136	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	57	1,321	\$152,893	\$2,682	\$116	23
Targeted Case Management		T1017		15 minutes	59	1,757	\$128,841	\$2,184	\$73	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	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	126	180	\$34,891	\$277	\$194	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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Pathways 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					443		\$2,657,746			

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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	8	36	\$25,604	\$3,201	\$711	5
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	130	138	\$31,434	\$242	\$228	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	37	\$2,544	\$88	\$69	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	3	22	\$2,773	\$924	\$126	7
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	255	1,480	\$202,708	\$795	\$137	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	4	4	\$619	\$155	\$155	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	16	16	\$1,994	\$125	\$125	1
Therapy-Family Therapy		90847		Encounter	35	79	\$10,793	\$308	\$137	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	5	30	\$2,257	\$451	\$75	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	149	573	\$53,847	\$361	\$94	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	242	252	\$21,654	\$89	\$86	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	50	2,151	\$12,322	\$246	\$6	43
Assessment		H0031		Encounter	189	198	\$27,085	\$143	\$137	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	196	252	\$33,341	\$170	\$132	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	24	2,910	\$100,022	\$4,168	\$34	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	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	41	262	\$9,005	\$220	\$34	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	1	151	\$27,589	\$27,589	\$183	151
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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State of Michigan

Pines

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	2	2	\$172	\$86	\$86	1
Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	13	13	\$536	\$41	\$41	1
Health Services		T1002		Up to 15 min	93	198	\$8,167	\$88	\$41	2
Respite Care		T1005		15 Minutes	10	7,120	\$10,681	\$1,068	\$2	712
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	4	\$165	\$165	\$41	4
Targeted Case Management		T1017		15 minutes	4	132	\$5,444	\$1,361	\$41	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	1	151	\$3,941	\$3,941	\$26	151
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	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					458		\$594,697			

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State of Michigan

Saginaw

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	479	\$168,268	\$24,038	\$351	68
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	13	168	\$92,614	\$7,124	\$551	13
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	73	499	\$333,278	\$4,565	\$668	7
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	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90801		Encounter	91	93	\$9,679	\$106	\$104	1
Assessment-Psychiatric Assessment		90802		Encounter	6	6	\$1,774	\$296	\$296	1
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	44	68	\$7,803	\$177	\$115	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	214	1,465	\$180,630	\$844	\$123	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	24	53	\$17,497	\$729	\$330	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	13	32	\$5,136	\$395	\$161	2
Therapy-Family Therapy		90847		Encounter	82	289	\$3,325	\$41	\$12	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	8	43	\$39,776	\$4,972	\$925	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	187	518	\$27,726	\$148	\$54	3

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Saginaw	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	2	2	\$1,218	\$609	\$609	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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Saginaw	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			5	5	\$411	\$82	\$82	1
Additional Codes-Physician Services		99222			58	64	\$7,196	\$124	\$112	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			51	189	\$6,428	\$126	\$34	4
Additional Codes-Physician Services		99232			56	181	\$11,450	\$204	\$63	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	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	1	5	\$29	\$29	\$6	5
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			1	1	\$109	\$109	\$109	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
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	76	92	\$8,372	\$110	\$91	1
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	20	308	\$9,548	\$477	\$31	15
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	14	221	\$16,575	\$1,184	\$75	16
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	16	288	\$72,000	\$4,500	\$250	18
Substance Abuse: Residential	1002	H0019		Days	24	2,409	\$423,984	\$17,666	\$176	100
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	252	255	\$34,730	\$138	\$136	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	14	29	\$14,790	\$1,056	\$510	2
Substance Abuse: Phamalogical 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	222	23,955	\$1,232,945	\$5,554	\$51	108
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	204	2,256	\$230,718	\$1,131	\$102	11
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	1	228	\$14,364	\$14,364	\$63	228
Community Living Supports (Daily)		H2016	TG	Per Diem	1	76	\$87,303	\$87,303	\$1,149	76
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	24	463	\$31,779	\$1,324	\$69	19
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	21	79	\$5,925	\$282	\$75	4
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	2	3	\$109	\$55	\$36	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	51	501	\$559	\$11	\$1	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	0	0	\$0	\$0	\$0	0
Health Services		T1002		Up to 15 min	133	473	\$23,250	\$175	\$49	4
Respite Care		T1005		15 Minutes	44	9,620	\$36,319	\$825	\$4	219
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	5	62	\$34,181	\$6,836	\$551	12
Targeted Case Management		T1017		15 minutes	61	2,281	\$108,255	\$1,775	\$47	37
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	228	\$4,508	\$4,508	\$20	228
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1	76	\$2,247	\$2,247	\$30	76
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	219	281	\$109,206	\$499	\$389	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	28	28	\$12,179	\$435	\$435	1
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	31	39	\$8,305	\$268	\$213	1
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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Saginaw										
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					784		\$3,436,498			

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Sanilac 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	62	\$20,206	\$20,206	\$326	62
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	18	233	\$155,957	\$8,664	\$669	13
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	1	3	\$534	\$534	\$178	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	30	30	\$17,280	\$576	\$576	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	17	18	\$1,172	\$69	\$65	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	87	597	\$59,927	\$689	\$100	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	4	6	\$961	\$240	\$160	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	3	19	\$2,317	\$772	\$122	6
Therapy-Family Therapy		90847		Encounter	47	194	\$31,969	\$680	\$165	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	17	79	\$14,475	\$851	\$183	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	72	254	\$58,167	\$808	\$229	4

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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	4	4	\$800	\$200	\$200	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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Sanilac	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	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	5	91	\$45,744	\$9,149	\$503	18
Assessment		H0031		Encounter	110	116	\$32,967	\$300	\$284	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	107	170	\$35,873	\$335	\$211	2
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	12	19	\$2,088	\$174	\$110	2
Home Based Services		H0036		15 Minutes	40	3,861	\$265,033	\$6,626	\$69	97
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	7	56	\$2,574	\$368	\$46	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	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

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Sanilac	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	2	2	\$210	\$105	\$105	1
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	108	344	\$31,382	\$291	\$91	3
Respite Care		T1005		15 Minutes	7	3,313	\$8,358	\$1,194	\$3	473
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	19	288	\$34,420	\$1,812	\$120	15
Targeted Case Management		T1017		15 minutes	37	448	\$31,620	\$855	\$71	12
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	20	\$10,146	\$676	\$507	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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Sanilac 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					132		\$864,180			

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Shiawassee

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	74	\$15,532	\$7,766	\$210	37
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	9	94	\$64,024	\$7,114	\$681	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	12	76	\$45,161	\$3,763	\$594	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	2	\$5	\$5	\$2	2
Assessment-Psychiatric Assessment		90801		Encounter	48	52	\$20,632	\$430	\$397	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	32	120	\$10,074	\$315	\$84	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	53	254	\$36,726	\$693	\$145	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	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	7	20	\$3,662	\$523	\$183	3
Therapy-Family Therapy		90847		Encounter	85	532	\$112,147	\$1,319	\$211	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	4	4	\$395	\$99	\$99	1
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	90	313	\$30,684	\$341	\$98	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	1	2	\$463	\$463	\$232	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	3	10	\$4,876	\$1,625	\$488	3
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			2	2	\$75	\$38	\$38	1
Additional Codes-Physician Services		99222			9	10	\$338	\$38	\$34	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			9	27	\$966	\$107	\$36	3
Additional Codes-Physician Services		99232			9	29	\$1,019	\$113	\$35	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	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	95	96	\$25,588	\$269	\$267	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
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	35	4,888	\$295,706	\$8,449	\$60	140
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	1	17	\$137	\$137	\$8	17
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	29	191	\$30,153	\$1,040	\$158	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	15	11,699	\$40,869	\$2,725	\$3	780
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	9	664	\$20,332	\$2,259	\$31	74
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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Shiawassee	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	5	5	\$281	\$56	\$56	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	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	1	6	\$783	\$783	\$131	6
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	1,162	\$9,187	\$1,021	\$8	129
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	1	\$89	\$89	\$89	1
Targeted Case Management		T1017		15 minutes	44	1,060	\$96,653	\$2,197	\$91	24
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	42	61	\$45,934	\$1,094	\$753	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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Shiawassee 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					220		\$912,494			

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St. Clair

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	61	509	\$301,725	\$4,946	\$593	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	14	74	\$20,827	\$1,488	\$281	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	271	371	\$57,553	\$212	\$155	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	127	847	\$101,717	\$801	\$120	7
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	256	2,758	\$328,747	\$1,284	\$119	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	51	231	\$46,355	\$909	\$201	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	62	155	\$21,399	\$345	\$138	3
Therapy-Family Therapy		90847		Encounter	155	1,001	\$137,187	\$885	\$137	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	67	1,008	\$65,460	\$977	\$65	15
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	185	644	\$58,150	\$314	\$90	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	\$14,764	\$7,382	\$2,109	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	12	12	\$7,956	\$663	\$663	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	10	95	\$15,031	\$1,503	\$158	10
Occupational or Physical Therapy		97530		15 Minutes	9	87	\$6,482	\$720	\$75	10
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 - T 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	11	309	\$45,272	\$4,116	\$147	28
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	37	936	\$122,859	\$3,321	\$131	25
Assessment		H0031		Encounter	270	276	\$86,872	\$322	\$315	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	143	186	\$51,068	\$357	\$275	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	117	60,802	\$1,470,800	\$12,571	\$24	520
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	4	21	\$1,727	\$432	\$82	5
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	290	\$18,418	\$658	\$64	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	23	1,264	\$5,156	\$224	\$4	55
Community Living Supports (Daily)		H2016		Per Diem	1	31	\$469	\$469	\$15	31
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per Diem	11	625	\$84,963	\$7,724	\$136	57
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	74	356	\$42,076	\$569	\$118	5
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		15 Minutes	1	384	\$576	\$576	\$2	384
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	1	1	\$76	\$76	\$76	1
Health Services		S9446		Encounter	4	10	\$1,013	\$253	\$101	3
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	6	6	\$3,715	\$619	\$619	1
Health Services		T1002		Up to 15 min	10	24	\$2,850	\$285	\$119	2
Respite Care		T1005		15 Minutes	24	5,629	\$29,588	\$1,233	\$5	235
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	88	1,344	\$116,699	\$1,326	\$87	15
Targeted Case Management		T1017		15 minutes	192	7,039	\$556,390	\$2,898	\$79	37
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	12	656	\$7,518	\$626	\$11	55
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		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter	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	40	299	\$21,023	\$526	\$70	7
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					471		\$3,852,477			

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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	9	50	\$31,240	\$3,471	\$625	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	1	4	\$1,259	\$1,259	\$315	4
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	110	117	\$29,079	\$264	\$249	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	55	97	\$6,276	\$114	\$65	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	3	3	\$511	\$170	\$170	1
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	162	1,107	\$117,043	\$722	\$106	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	5	6	\$1,014	\$203	\$169	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	57	156	\$16,118	\$283	\$103	3
Therapy-Family Therapy		90847		Encounter	78	209	\$21,522	\$276	\$103	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	11	144	\$14,612	\$1,328	\$101	13
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	243	861	\$73,357	\$302	\$85	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	1	1	\$180	\$180	\$180	1
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	101	104	\$19,308	\$191	\$186	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	78	1,048	\$143,310	\$1,837	\$137	13
Assessment		H0031		Encounter	160	165	\$38,115	\$238	\$231	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	93	102	\$10,846	\$117	\$106	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	67	8,450	\$257,682	\$3,846	\$30	126
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	62	402	\$28,222	\$455	\$70	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	77	56,093	\$169,973	\$2,207	\$3	728
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	8	227	\$13,050	\$1,631	\$57	28
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	37	418	\$62,346	\$1,685	\$149	11
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	9	7,780	\$38,200	\$4,244	\$5	864
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	103	2,815	\$145,029	\$1,408	\$52	27
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		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter	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					488		\$1,238,291			

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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	3	217	\$37,975	\$12,658	\$175	72
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	58	372	\$252,636	\$4,356	\$679	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	2	23	\$17,958	\$8,979	\$781	12
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	8	\$1,310	\$1,310	\$164	8
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	573	590	\$137,978	\$241	\$234	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	55	69	\$6,956	\$126	\$101	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	436	1,641	\$291,502	\$669	\$178	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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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	\$433	\$217	\$217	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	1	17	\$1,323	\$1,323	\$78	17
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	2	2	\$357	\$178	\$178	1
Therapy-Family Therapy		90847		Encounter	101	323	\$57,613	\$570	\$178	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	69	336	\$35,330	\$512	\$105	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	175	422	\$40,082	\$229	\$95	2

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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	1	1	\$306	\$306	\$306	1
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	\$134	\$134	\$134	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		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	19	22	\$1,121	\$59	\$51	1
Additional Codes-Physician Services		99213		Encounter	60	102	\$6,065	\$101	\$59	2

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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	1	1	\$263	\$263	\$263	1
Additional Codes-Physician Services		99253		Encounter	1	1	\$340	\$340	\$340	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	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	14	14	\$10,644	\$760	\$760	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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Summit Pointe 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	2	6	\$492	\$246	\$82	3
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
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	140	25,124	\$780,128	\$5,572	\$31	179
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	58	439	\$44,745	\$771	\$102	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	7	3,365	\$35,332	\$5,047	\$10	481
Community Living Supports (15 Minutes)		H2015		15 Minutes	11	15,685	\$58,680	\$5,335	\$4	1,426
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	155	\$47,914	\$47,914	\$309	155
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	61	1,241	\$52,704	\$864	\$42	20
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	2	25	\$340	\$170	\$14	13

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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	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	8	\$164	\$41	\$21	2
Respite Care		T1005		15 Minutes	56	91,180	\$114,558	\$2,046	\$1	1,628
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	854	\$42,350	\$830	\$50	17
Targeted Case Management		T1017		15 minutes	22	918	\$45,450	\$2,066	\$50	42
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	155	\$4,166	\$4,166	\$27	155
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	1	1	\$360	\$360	\$360	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

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Summit Pointe 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					950		\$2,127,709			

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Tuscola	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	43	\$25,723	\$6,431	\$598	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	11	52	\$31,605	\$2,873	\$608	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	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	86	91	\$27,310	\$318	\$300	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	16	36	\$2,968	\$186	\$82	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	71	488	\$53,882	\$759	\$110	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	9	19	\$4,096	\$455	\$216	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	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	8	12	\$1,589	\$199	\$132	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	19	102	\$7,753	\$408	\$76	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	114	412	\$50,444	\$442	\$122	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	2	8	\$674	\$337	\$84	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	1	1	\$0	\$0	\$0	1

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Additional Codes-Physician Services		99214		Encounter	8	8	\$412	\$51	\$51	1
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			3	3	\$198	\$66	\$66	1
Additional Codes-Physician Services		99222			9	9	\$1,169	\$130	\$130	1
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			7	28	\$1,122	\$160	\$40	4
Additional Codes-Physician Services		99232			11	36	\$1,188	\$108	\$33	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	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	55	57	\$10,928	\$199	\$192	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	92	104	\$19,845	\$216	\$191	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	89	9,022	\$305,114	\$3,428	\$34	101
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	31	278	\$15,827	\$511	\$57	9
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	2	557	\$141,401	\$70,701	\$254	279
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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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	2	50	\$251	\$125	\$5	25
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	16	\$1,483	\$742	\$93	8
Targeted Case Management		T1017		15 minutes	48	1,535	\$69,640	\$1,451	\$45	32
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	23	33	\$8,648	\$376	\$262	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	2	4	\$43	\$21	\$11	2
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

Tuscola	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					220		\$783,314			

CMHSP Cost Data by Service Category

Children with Mental Illness

Fiscal Year 2006-2007

State of Michigan

Van Buren

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	10	81	\$57,499	\$5,750	\$710	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	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	38	38	\$9,500	\$250	\$250	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	79	215	\$12,900	\$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	105	431	\$51,720	\$493	\$120	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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Children with Mental Illness

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State of Michigan

Van Buren

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	34	36	\$6,480	\$191	\$180	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	33	53	\$6,360	\$193	\$120	2
Therapy-Family Therapy		90847		Encounter	89	230	\$27,600	\$310	\$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	32	215	\$10,320	\$323	\$48	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	105	397	\$24,812	\$236	\$62	4

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Van Buren

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	29	152	\$18,240	\$629	\$120	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	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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Van Buren

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
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	84	90	\$8,100	\$96	\$90	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	5	126	\$35,840	\$7,168	\$284	25
Assessment		H0031		Encounter	116	118	\$21,240	\$183	\$180	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	125	150	\$18,000	\$144	\$120	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	1,660	\$124,500	\$6,917	\$75	92
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	1	\$70	\$70	\$70	1
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	4	6	\$1,015	\$254	\$169	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	48	206	\$5,150	\$107	\$25	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	23	514	\$4,112	\$179	\$8	22
Community Living Supports (15 Minutes)		H2015		15 Minutes	59	3,977	\$31,816	\$539	\$8	67
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	93	5,464	\$409,800	\$4,406	\$75	59
Wraparound		H2022		Days	2	21	\$8,820	\$4,410	\$420	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	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	17	64	\$17,250	\$1,015	\$270	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	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	8	1,456	\$8,736	\$1,092	\$6	182
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	4	57	\$4,275	\$1,069	\$75	14
Targeted Case Management		T1017		15 minutes	58	2,721	\$204,075	\$3,519	\$75	47
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	16	21	\$3,780	\$236	\$180	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					408		\$1,132,010			

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State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	6	655	\$177,295	\$29,549	\$271	109
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	139	\$75,011	\$12,502	\$540	23
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	60	469	\$335,077	\$5,585	\$714	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	24	\$6,000	\$3,000	\$250	12
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	210	300	\$273,549	\$1,303	\$912	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	1	22	\$4,062	\$4,062	\$185	22
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	1	3	\$279	\$279	\$93	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	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	359	3,338	\$831,229	\$2,315	\$249	9
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	11	94	\$38,201	\$3,473	\$406	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	245	1,143	\$104,927	\$428	\$92	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	1	2	\$2,075	\$2,075	\$1,037	2
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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Washtenaw

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
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	0	0	\$0	\$0	\$0	0
Substance Abuse: Assessment		H0031		Encounter	1	1	\$250	\$250	\$250	1
Treatment Planning		H0032		Encounter	157	184	\$102,304	\$652	\$556	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	13	1,749	\$75,732	\$5,826	\$43	135
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	4	\$194	\$194	\$48	4
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	68	421	\$7,363	\$108	\$17	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	2	4,892	\$20,840	\$10,420	\$4	2,446
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	15	503	\$74,731	\$4,982	\$149	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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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	2	6	\$1,295	\$647	\$216	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	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	4	6,520	\$13,692	\$3,423	\$2	1,630
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	17	102	\$10,608	\$624	\$104	6
Targeted Case Management		T1017		15 minutes	210	1,612	\$68,050	\$324	\$42	8
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	78	116	\$45,677	\$586	\$394	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					493		\$2,268,440			

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West 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	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	16	108	\$70,044	\$4,378	\$649	7
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	92	99	\$43,094	\$468	\$435	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	17	28	\$2,022	\$119	\$72	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	137	973	\$140,530	\$1,026	\$144	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	6	10	\$2,167	\$361	\$217	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	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	33	208	\$43,120	\$1,307	\$207	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	111	633	\$80,575	\$726	\$127	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	167	548	\$79,416	\$476	\$145	3

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West Michigan										
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	8	15	\$2,480	\$310	\$165	2
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	17	62	\$10,241	\$602	\$165	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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West Michigan										
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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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	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	207	219	\$62,603	\$302	\$286	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	184	272	\$43,574	\$237	\$160	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	32	11,187	\$458,108	\$14,316	\$41	350
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	2	\$131	\$131	\$66	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	60	429	\$23,256	\$388	\$54	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	17	1,921	\$12,563	\$739	\$7	113
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	9	821	\$79,752	\$8,861	\$97	91
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	58	20,009	\$171,677	\$2,960	\$9	345

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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	129	408	\$76,374	\$592	\$187	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	68	15,553	\$27,373	\$403	\$2	229
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	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	82	3,677	\$122,150	\$1,490	\$33	45
Targeted Case Management		T1017		15 minutes	224	8,057	\$415,097	\$1,853	\$52	36
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	18	\$2,190	\$146	\$122	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					3	0	\$860	\$287	\$0	0

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West 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					483		\$1,969,397			

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State of Michigan

Woodlands

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	19	163	\$102,807	\$5,411	\$631	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	3	\$1,917	\$1,917	\$639	3
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	114	131	\$21,485	\$188	\$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	5	6	\$387	\$77	\$65	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	104	410	\$77,219	\$742	\$188	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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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	6	12	\$2,268	\$378	\$189	2
Therapy-Family Therapy		90847		Encounter	58	185	\$34,781	\$600	\$188	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	10	53	\$10,229	\$1,023	\$193	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	60	174	\$14,168	\$236	\$81	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	1	1	\$129	\$129	\$129	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	\$162	\$162	\$162	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	2	104	\$1,799	\$900	\$17	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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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	88	89	\$16,660	\$189	\$187	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	62	63	\$12,130	\$196	\$193	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	53	54	\$10,206	\$193	\$189	1
Substance Abuse: Pharmacological Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	58	84	\$2,709	\$47	\$32	1
Home Based Services		H0036		15 Minutes	20	2,249	\$95,020	\$4,751	\$42	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	2	66	\$8,285	\$4,143	\$126	33
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	2	2	\$488	\$244	\$244	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	24	155	\$9,965	\$415	\$64	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	8	5,458	\$27,620	\$3,453	\$5	682
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	1	347	\$16,483	\$16,483	\$48	347
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	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	2	4	\$356	\$178	\$89	2
Respite Care		T1005		15 Minutes	8	2,361	\$9,574	\$1,197	\$4	295
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	46	1,810	\$116,629	\$2,535	\$64	39
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	1	347	\$8,675	\$8,675	\$25	347
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	20	25	\$3,882	\$194	\$155	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			1	1	\$350	\$350	\$350	1
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

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					238		\$606,383			