# SECTION 404 (2)(c) Part 3 TOTAL CMHSP COSTS BY SERVICE CATEGORY AND CMHSP FY 2014

Children with Serious Emotional Disturbance (SED)

# Overview

The data that are presented in this section were provided by CMHSPs as required by the FY 2014 MDCH/CMHSP contract. Cost data were collected for the reporting period October 1, 2013 to September 30, 2014 and submitted to MDCH by March 2, 2015. The data in this section represent the total costs associated with providing mental health services to children with a serious emotional disturbance (child MI) by service category for each of the 46 CMHSPs within the State of Michigan.

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

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	109	\$24,307	\$8,102	\$223	36
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	27	259	\$177,590	\$6,577	\$686	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	23	\$16,836	\$4,209	\$732	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	4	23	\$9,861	\$2,465	\$429	6
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0
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# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			63	67	\$27,701	\$440	\$413	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	28	66	\$6,711	\$240	\$102	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	26	69	\$11,026	\$424	\$160	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	61	261	\$52,497	\$861	\$201	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	30	93	\$21,927	\$731	\$236	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	64	239	\$52,345	\$818	\$219	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	11	271	\$43,607	\$3,964	\$161	25
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

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Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014
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Seron Expanger         Resord Support         Post Support         Concount of Stable         Concount of Stable <th>Allegan</th> <th></th> <th></th> <th></th> <th>Unit</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	Allegan				Unit						
Special Elamage Theory   9254   Ecounter's SOME   0   0   50   50   50   0   50   50	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Relanguage Pricegy   92556   Resource 75-80-Min   0   0   90   90   90   90   90   90	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
System   PSYCHTYNS   96101   Becometer 45-50 Mbm   0	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assentance for Aurilance   940101   U5   Resourcer 75-00 Min.   0   0   50   50   50   50   0   0   0	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Toxing by Technicism	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Automate for Automa	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp   96103   30 Manues   0   0   90   95   95   95   0   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment   Section   S	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Author Assessment Asse	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Accordance Chler   96111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Membehavioral Status Exam	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism Neuropsych test Admin w Comp 96120 60 Minutes 0 0 0 50 50 50 50 0 Medication Administration 96727 60 Minutes 0 0 0 50 50 50 50 0 Medication Administration 96737 60 Minutes 0 0 0 50 50 50 50 0 Medication Administration 96737 First 30.74 Min. 0 0 0 50 50 50 50 0 Medication Administration 96737 Physical Therapy 97001 First 30.74 Min. 0 0 0 50 50 50 50 0  Physical Therapy 97002 Each Additional 20 0 0 50 50 50 50 0  Coccapational Propsycal Therapy 97004 Eacounter 1 1 1 5221 5221 5221 1 Questional Therapy 97004 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97110 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97112 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97116 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97116 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97116 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97116 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97110 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97114 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97116 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97120 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97130 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97140 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97150 Eacounter 0 0 0 50 50 50 50 0  Coccapational or Physical Therapy 97150 Eacounter 0 0 0 50 50 50 50 50 0  Coccapational or Physical Therapy 97150 Eacounter 0 0 0 50 50 50 50 50 0  Coccapational or Physical Therapy 97150 Eacounter 0 0 0 50 50 50 50 50 0  Coccapational or Physical Therapy 97150 Eacounter 0 0 0 50 50 50 50 50 50 0  Cocca	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Auttsim	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropych test Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         80         80         80         0           Physical Therapy         97001         First 30 74 Min         0         0         80         80         80         0           Physical Therapy         97002         Each Additional 30 or Minutes         0         0         80         50         50         0           Occupational Therapy         97003         Encounter         1         1         1         8221         8221         8221         8221         1           Occupational Therapy         97004         Encounter         0         0         50         50         50         0         0           Occupational or Physical Therapy         97110         Encounter         0         0         50	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0   0   1   1   1   1   1   1   1	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   S0   S0   S0   S0   0	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minutes   Securation   Securatio	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy   97004   Encounter   0   0   S0   S0   S0   S0   0	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy   97110   Encounter   0   0   S0   S0   S0   S0   O	Occupational Therapy		97003		Encounter	1	1	\$221	\$221	\$221	1
Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97150         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97530         Encounter         1         8         \$252         \$252         \$32         8           Occupational or Physical Therapy         97532         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97533         Encounter         0	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         50         50         \$0         0           Occupational or Physical Therapy         97116         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97150         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97530         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97532         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97533         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97535         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97537         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97542         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97755         Encounter         0         0         <	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         1         8         \$252         \$252         \$32         8           Occupational or Physical Therapy         97532         Encounter         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>1</td> <td>8</td> <td>\$252</td> <td>\$252</td> <td>\$32</td> <td>8</td>	Occupational or Physical Therapy		97530		Encounter	1	8	\$252	\$252	\$32	8
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

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Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	1	1	\$78	\$78	\$78	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	2	2	\$162	\$81	\$81	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	66	101	\$9,255	\$140	\$92	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	63	108	\$13,878	\$220	\$129	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	4	8	\$735	\$184	\$92	2
Additional Codes-Physician Services		99222		15 Minutes	3	3	\$312	\$104	\$104	1
Additional Codes-Physician Services		99223		Encounter	4	4	\$360	\$90	\$90	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226	-	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	7	18	\$1,533	\$219	\$85	3
Additional Codes-Physician Services		99232		15 Minutes	4	12	\$995	\$249	\$83	3
Additional Codes-Physician Services		99233		15 Minutes	4	6	\$540	\$135	\$90	2
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	8	16	\$2,253	\$282	\$141	2
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	2	39	\$30,637	\$15,318	\$786	20
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	146	152	\$52,314	\$358	\$344	1
Assessment for Autism		H0031	U5	Encounter	1	1	\$308	\$308	\$308	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	127	224	\$81,098	\$639	\$362	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	24	27	\$9,775	\$407	\$362	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	102	12,833	\$903,417	\$8,857	\$70	126
Home Based Services		H0036	ST	Encounter	1	10	\$630	\$630	\$63	10
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

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Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	9	42	\$2,112	\$235	\$50	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	1	168	\$2,586	\$2,586	\$15	168
Community Living Supports (15 Minutes)		H2015		Encounter	3	1,941	\$10,761	\$3,587	\$6	647
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	1	344	\$30,410	\$30,410	\$88	344
Behavior Services		H2019		Per mile	1	65	\$3,051	\$3,051	\$47	65
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	15	532	\$110,572	\$7,371	\$208	35
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	2	173	\$10,151	\$5,075	\$59	87
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	8	78	\$23,795	\$2,974	\$305	10
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	2	93	\$31,721	\$15,861	\$341	47
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	21	3,586	\$12,342	\$588	\$3	171
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	3	67	\$118	\$39	\$2	22
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	12	243	\$18,193	\$1,516	\$75	20
Targeted Case Management		T1017		Per Diem	9	366	\$17,586	\$1,954	\$48	41
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	59	69	\$20,741	\$352	\$301	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Allegan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	11	79	\$3,325	\$302	\$42	7
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	44	306	\$22,100	\$502	\$72	7
Respite Care		T2037		Days	5	21	\$884	\$177	\$42	4
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					255		\$1,873,607			

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	7	64	\$47,013	\$6,716	\$735	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	51	\$35,223	\$8,806	\$691	13
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			38	38	\$15,994	\$421	\$421	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	103	104	\$42,247	\$410	\$406	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	142	255	\$24,128	\$170	\$95	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	189	396	\$62,478	\$331	\$158	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	270	1,033	\$279,986	\$1,037	\$271	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	72	153	\$26,965	\$375	\$176	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	293	840	\$146,964	\$502	\$175	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	37	267	\$18,329	\$495	\$69	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# bance SUB-ELEMENT COST REPORT: Fiscal Year 2014

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	11	120	\$24,419	\$2,220	\$203	11
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	1	1	\$439	\$439	\$439	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	102	331	\$43,002	\$422	\$130	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	219	1,076	\$153,470	\$701	\$143	5
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	24	36	\$5,246	\$219	\$146	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232	-	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	12	12	\$1,224	\$102	\$102	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	355	369	\$101,998	\$287	\$276	1
Assessment for Autism		H0031	U5	Encounter	4	4	\$1,349	\$337	\$337	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician		H0032	TS	Encounter	418	694	\$65,049	\$156	\$94	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	33	2,249	\$119,166	\$3,611	\$53	68
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Classifier   Service   Ser	AuSable Valley				Unit						
Communicy Funds Supports in Microgram Princip Supports in Microgram Princip Supports in Microgram Princip Supports in Microgram Princip Supports Princip Supp	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Perpir   10015	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Post-Discretated Cyclesco Sergeries   19034   19036	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Lebonatory   1004   1004   100   10	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Pathuane Abuse: Computered Treatment   10000	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Publisher Trailment Plan Review   Maillon   Benouter   0   0   0   50   50   50   0   0   0	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Debite France Fine Review - Monitoring Activities   H2000   TS   Becounter   0   0   50   50   50   0   0   Comprehensive Modication Services - EBP only   H2010   Becounter   0   0   50   30   30   0   0   0   0   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptions Molication Services - EBP only   10   10   15   15   15   15   15   15	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Crisin Intervention   H2011   Becounter   \$8   479   \$26,088   \$300   \$85   \$5   \$5	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill-Building and Our of Home Non Vocational Habilitation   H2014   Encounter   322   14,418   \$88,706   \$266   \$66   48   \$8   \$8   \$1,666   \$79   \$19   \$19   \$19   \$10	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)   H2015   Faccounter   5   954   \$8,329   \$1,866   \$9   191	Crisis Intervention		H2011		Encounter	88	479	\$26,383	\$300	\$55	5
Community Living Supports (Daily)   H2016   Encounter   0   0   50   50   50   50   0   0   Community Living Supports (Daily)   H2016   TF   15 Minutes   0   0   50   50   50   50   0   0   0	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	322	14,418	\$85,706	\$266	\$6	45
Community Living Supports Chaily   H2016   TF   15 Minutes   0   0   50   50   50   50   0	Community Living Supports (15 Minutes)		H2015		Encounter	5	954	\$8,329	\$1,666	\$9	191
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Belavioral Intervention (ABI).   H2019   U.5   Per one-way trip   3   739   \$43,587   \$14,529   \$59   246	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIIB)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Per one-way trip   0   0   50   50   50   50   50   50	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	3	739	\$43,587	\$14,529	\$59	246
Marparound (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	3	343	\$33,530	\$11,177	\$98	114
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	42	2,261	\$64,767	\$1,542	\$29	54
Mental Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0914, 0915, 0919   H2030   Refer to code descriptions.   0   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	5	363	\$6,810	\$1,362	\$19	73
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Page 145	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         50         50         50         0           Transportation         S0215         Encounter         0         0         \$0 <td>Substance Abuse: Outpatient Care</td> <td></td> <td>H2036</td> <td></td> <td></td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         \$0.00	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         \$5         \$70         \$3,832         \$766         \$55         \$14           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,937	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         218         1,537         \$304,529         \$1,397         \$198         7           Family Training         S5111         HA         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	5	70	\$3,832	\$766	\$55	14
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	218	1,537	\$304,529	\$1,397	\$198	7
Family Training S5111 HM Days 0 0 \$0 \$0 \$0 0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

Foster Care	evenue Code HCPCS Code S5140	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	
	\$5140								Unit/Case
			Days	0	0	\$0	\$0	\$0	0
Foster Care	S5145		Days	0	0	\$0	\$0	\$0	0
Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Respite	S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S9446		15 minutes	2	2	\$39	\$20	\$20	1
Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1001		Encounter	75	75	\$7,435	\$99	\$99	1
Health Services	T1002		15 Minutes	49	338	\$8,626	\$176	\$26	7
Respite Care	T1005		Encounter	11	3,406	\$14,141	\$1,286	\$4	310
Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1016		Per Diem	1	15	\$1,034	\$1,034	\$69	15
Targeted Case Management	T1017		Per Diem	387	7,250	\$697,274	\$1,802	\$96	19
Nursing Home Mental Health Monitoring	T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1023		15 Minutes	19	20	\$2,837	\$149	\$142	1
Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1999		Days	0	0	\$0	\$0	\$0	0
Transportation	T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

ALL

#### Children with Serious Emotional Disturbance

A G 11 Y/P										
AuSable Valley	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code	neres code	Wouller	Measure	Cases	Ullits	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	1	2	\$259	\$259	\$130	2
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0

Service

0

642

0

\$0

\$2,523,807

\$0

\$0

0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Aggregate for 'J' Codes

**Total Population and Cost** 

Secure Depuls   Secure Depul	Barry				Unit						
Control   Cont	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	State Psychiatric Hospital - Inpatient PT22			PT22	Days	0	0	\$0	\$0	\$0	0
Depair Note   Propriet   Propri	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Pagenter Respiral Ancillary Services - Romand Board   044	Local Psychiatric Hospital/IMD PT68			PT68	Days	15	132	\$121,039	\$8,069	\$917	9
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	2	23	\$16,331	\$8,165	\$710	12
Equation Hospital Ancillary Services - Patentiary   0.59 0.054, 0.27 0.058   Days   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hospital Auxillary Services - Medical/Surgical Singulates   100,00000,000000000000000000000000000	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Paperies Hospital Ascellary Services - Industry   0300-0302, 0305-0307   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inquient Hospital Ancellary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
ECT Amendmental   Displace   Hospital Ancillary Services - Respiratory Services   Otto   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Respiratory Services   Otto   Otto   So   So   So   Otto	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Cocapitional Therapy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Speech Flanguage   O440-0444	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Papatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge   0901   # of tests   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric/Psychological Partial Hospital Ancillary Services   0900, 0902-0904, 0911, 0914-0919   0900, 0902-0904, 0911, 0914-0919   0911, 0914-0919   0912   Encounter   1   2   \$783   \$783   \$392   2   2   2   2   2   2   2   2   2	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Compatient Partial Hospitalization   O912   Encounter   1   2   \$783   \$783   \$392   2	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         50         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services				Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   0   0   50   \$0   \$0   \$0   \$0   Inpatient Hospital Ancillary Services - Other Therapeutic   0940-0942   Days   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0912			Encounter	1	2	\$783	\$783	\$392	2
Inpatient Hospital Ancillary Services - Other Therapeutic Services   Days   D	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

#### State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Barry Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	Trevenue code									
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791	LIE		5	5	\$1,201	\$240	\$240	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	11	11	\$2,276	\$207	\$207	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	26	35	\$3,811	\$147	\$109	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	117	365	\$78,532	\$671	\$215	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	119	294	\$95,322	\$801	\$324	2
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	1	1	\$328	\$328	\$328	1
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	25	98	\$21,367	\$855	\$218	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	1	2	\$34	\$34	\$17	2
Therapy-Family Therapy		90847		Encounter 75-80 Min	117	389	\$83,838	\$717	\$216	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	1	2	\$325	\$325	\$163	2
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	40	241	\$18,228	\$456	\$76	6
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	2	4	\$219	\$109	\$55	2
Pharmacological Management (SED Waiver)	<u> </u>	90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
~r		,2022			•	-	Ψ7	40	Ψ0	

Children with Serious Emotional Disturbance

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processing   Pro	Barry				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97904   Beah Additional IS   0   0   0   50   10   0   0   50   50	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Submire Abse: Acquaretree   9781   Excounter   0   0   0   0   0   0   0   0   0	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Selections After: Asproximent   97811   Excounter   0	Health Services		97804			0	0	\$0	\$0	\$0	0
New Places Poulantin and Management   92.011   1.6 kBur   0   0   0   30   30   30   0   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parkers Evaluation and Management   93201   U5   Hour   0   0   30   30   30   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Foolation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99202   U5   Hour   0   0   50   50   50   50   0	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Foulantion and Management   992051   Per Hour   S   S   S   S   S   S   S   S   S	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Accounter for Authinn   Sep.   US   Executator   0   0   50   50   50   50   0   0	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Spill-tames Above: New Patient Evaluation and Management   99204   Eacounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	5	5	\$1,044	\$209	\$209	1
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuss: New Patient Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   0	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 Substance Abuser, New Parient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 0 Sacsiment for Aurism 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Aurism 99212 Established Parient Evaluation and Management 99212 Established Parient Evaluation and Management 99212 U5 Encounter 11 12 51,399 5127 5117 1 Sacsiment for Aurism 99212 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Aurism 99213 U5 Encounter 15 65 \$65 \$6,064 \$173 \$593 2 Assessment for Aurism 99214 U5 Encounter 15 65 \$65 \$6,064 \$173 \$593 2 Assessment for Aurism 99213 U5 Encounter 15 65 \$65 \$6,064 \$173 \$593 2 Assessment for Aurism 99214 U5 Encounter 15 65 \$65 \$6,064 \$173 \$593 2 Assessment for Aurism 99214 U5 Encounter 0 0 0 50 50 50 50 0 Established Parient Evaluation and Management 99213 U5 Encounter 0 0 0 50 50 50 50 0 Established Parient Evaluation and Management 99214 Sacsiment for Aurism 99214 Sacsiment for Aurism 99214 Sacsiment for Aurism 99214 Sacsiment for Aurism 99215 Sacsiment for Aurism 99215 Sacsiment for Aurism 99216 Sacsiment for Aurism 99217 Sacsiment for Aurism 99218 Sacsiment for Aurism 99219 Sacsiment for Aurism 99219 Sacsiment for Aurism 99210 Sacsiment for Aurism 99211 Sacsiment for Aurism 99212 Sacsiment for Aurism 99213 Sacsiment for Aurism 99214 Sacsiment for Aurism 99215 Sacsiment for Aurism 99215 Sacsiment for Aurism 99216 Sacsiment for Aurism Sacsiment for Aurism 99216 Sacsiment for Aurism Sacsime	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   0   0   Established Patient Evaluation and Management   99211   US   Encounter   0   0   0   S0   S0   S0   S0   0   0	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99211	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   11   12   \$1,399   \$127   \$117   1	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   15   15   16   16   17   15   15   17   15   15   16   15   16   15   15   16   15   15	Established Patient Evaluation and Management		99212		Encounter	11	12	\$1,399	\$127	\$117	1
Assessment for Autism   99213   U5   Encounter   0   0   S0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   16   23   \$2,868   \$179   \$125   1     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	35	65	\$6,064	\$173	\$93	2
Assessment for Autism         99214         U5         15 Minutes         0         0         80         80         80         0           Established Patient Evaluation and Management         99215         15 Minutes         0         0         80         80         80         0           Assessment for Autism         99215         U5         15 Minutes         0         0         50         50         80         0           Additional Codes-Physician Services         99221         15 Minutes         1         1         895         895         895         895         1         1           Additional Codes-Physician Services         99222         15 Minutes         1         1         895         895         895         895         995         995         895         995	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	16	23	\$2,868	\$179	\$125	1
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$10         \$	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         1         1         \$10         \$10         \$10         \$1           Additional Codes-Physician Services         99222         15 Minutes         1         1         \$95         \$95         \$95         \$1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99222         15 Minutes         1         1         895         895         895         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0 <td< td=""><td>Assessment for Autism</td><td></td><td>99215</td><td>U5</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	1	1	\$10	\$10	\$10	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	1	1	\$95	\$95	\$95	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         1         2         \$18         \$18         \$9         2           Additional Codes-Physician Services         99232         15 Minutes         0         0         \$0 <td< td=""><td>Additional Codes-Physician Services</td><td></td><td>99225</td><td></td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	1	2	\$18	\$18	\$9	2
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processing   Pro	Barry				Unit						
Interspertation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Interseptation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Meditional Codes   Temporatrism	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Additional Coles   Tamperturine   Additional Coles   Tamperturine   Coles	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Delinancy Medical Equipment-Supples   E159   Benouter   0   0   50   50   50   50   0	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Panally Training-Support Effer de   0   93   93   93   93   93   94	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services   1000   100   50   50   50   50   50	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Machemen	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounter	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Subtrace Abase Chapter   February   Februa	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Comparient Treatment	Assessment		H0002		Encounter	14	14	\$3,800	\$271	\$271	1
Distance Abos: Content   Distance Abos: Cont	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management   19006   Encounter   0   0   0   50   50   50   0   0   50   50   50   0	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acuer Deteorification   1002   H0012   Encounter   0   0   50   50   50   50   0   Substance Abuse: Sub-Acuer Deteorification   1002   H0014   Encounter   0   0   50   50   50   50   0   Substance Abuse: Outpatient Care   0   0   0   50   50   50   0   Substance Abuse: Outpatient Care   0   0   0   50   50   50   0   Substance Abuse: Outpatient Care   0   0   0   50   50   50   0   Substance Abuse: Outpatient Care   0   0   0   50   50   50   0   Substance Abuse: Outpatient Care   0   0   0   50   50   50   0   Substance Abuse: Acuer Deteorising Care   1002   H0018   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Pere Directed and Operated Support Services   H0023   Encounter   0   0   50   50   50   0   Prevention Services - Direct Model   H0025   Encounter   0   0   50   50   50   50   0   Preventing Function   H0031   Encounter   189   201   596,517   5368   534   1   Assessment für Autsium   H0031   HW Encounter   189   201   596,517   5368   534   1   Assessment für Autsium   H0031   HW Encounter   0   0   50   50   50   50   50   Substance Abuse: Encounter   0   0   50   50   50   50   50   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         006         H0015         Encounter         0         0         50         50         50         0           Crisis Residential         1002         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50<	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   140014   Encounter   0   0   50   50   50   50   0   0   50   50   50   0	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Destance Abuse: Outpatient Care   0906   H0015   Encounter   0 0 0   \$0 0 0 0 0 0 0 0 0 0 0 0 0 0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services   H0018   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   1000	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   50   0   0   50	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Designation   H0022   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services   H0023   Encounter   0   0   S0   S0   S0   D0	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         189         201         \$69,517         \$368         \$346         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Treatment Planning         H0032         Encounter         65         65         \$18,484         \$284         \$284         \$1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Assessment		H0031		Encounter	189	201	\$69,517	\$368	\$346	1
Treatment Planning         H0032         Encounter         65         65         \$18,484         \$284         \$284         \$284         \$284         \$1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0 </td <td>Assessment for Autism</td> <td></td> <td>H0031</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	65	65	\$18,484	\$284	\$284	1
Health Services         H0034         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1         \$0         \$1	Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         Encounter         8         917         \$63,574         \$7,947         \$69         115           Home Based Services         H0036         ST         Encounter         0         0         \$	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	8	917	\$63,574	\$7,947	\$69	115
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
7 11	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Security	Barry				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Processes   1988   19	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuse: Labermory   Hillings   Encounter   0   0   0   50   50   50   50   50	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Secondary Presented   1901,	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pachsor Transmer Plan Review	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Publishies Treatment Plan Review - Mendersing Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Congressions Molications Services - EBP only	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention   H2011   Excounter   37   128   \$20,424   \$552   \$5160   3   \$30	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Mail Building and Out of Home Non Vocational Habilitation   H2014   Encounter   0   0   50   50   50   50   0   0   0	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	37	128	\$20,424	\$552	\$160	3
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports Chally    H2016   TG   Per mile   0   0   50   50   50   50   50   50	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Relavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   0   0   S0   S0   S0   S0   S0   S0	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Party Intensive Behavioral Intervention (EIBI)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   0   50   50   50   0   0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Modelation Review   M0064   Encounter   4   10   S512   \$128   \$51   3   \$128	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         4         10         \$512         \$128         \$51         3           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         \$0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	4	10	\$512	\$128	\$51	3
Substance Abuse Services: Transportation         \$0         \$15 Minutes         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	HM	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	1	2	\$562	\$562	\$281	2
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			3	31	\$1,348	\$449	\$43	10
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	1	1	\$223	\$223	\$223	1
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	8	12,165	\$40,738	\$5,092	\$3	1,521
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	4	27	\$8,364	\$2,091	\$310	7
Targeted Case Management		T1017		Per Diem	11	199	\$52,665	\$4,788	\$265	18
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	25	33	\$13,182	\$527	\$399	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other	·			Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					277		\$748,526			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Properties   Pro	Bay-Arenac				Unit						
See Mental Resentions Fieldly - Injention (1997)   1908   1908   1908   1908   1908   1909	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	State Psychiatric Hospital - Inpatient PT22			PT22	Days	4	128	\$33,024	\$8,256	\$258	32
Decide Psychiatric Monigolal Acade Commonstry PTTS   Digos   PTTS   Digos   National Position (1994)   PTTS   Digos   National Position (1994)   PTTS   Digos   National Position (1994)   National Position (19	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Pagint Respiral Ancillary Services - Romane Roma	Local Psychiatric Hospital/IMD PT68			PT68	Days	17	168	\$107,171	\$6,304	\$638	10
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	68	774	\$539,023	\$7,927	\$696	11
Experient Hospital Acuality Services - Nacious Surgical Supples   0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hospital Ancillary Services - Medical/Surgical Singules and Devices   Days   Days	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Pagisses   Pagisses	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Egeliant Hospital Ancalitary Services - Required type   1901		0270-0272			Days	0	0	\$0	\$0	\$0	0
Dect Amendmental   Dect Amendm	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Respiratory Services   Out	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Physical Therapy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inquatient Huspital Ancillary Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762   # of tests   0   0   50   50   50   50   0	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge   0901	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric/Psychological Opil, 0914-0919   Hour   0   0   0   50   50   50   0   0   0	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Treatments/Services   0911, 0914-0919   Outpatient Partial Hospitalization   0912   Encounter   0   0   50   50   50   0   0   0   0	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services				Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   Day	Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services   Days   D	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         1         11         \$120         \$120         \$11         11	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	1	11	\$120	\$120	\$11	11

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Serves (	Bay-Arenac				Unit						
Section	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mescale   9079	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment   9070	Assessment		90791			202	203	\$79,990	\$396	\$394	1
Mariel Health Congrient Care   90792   US   Encousier   0   0   930   930   930   900   930	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	2	2	\$681	\$340	\$340	1
Section	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Messemen	Mental Health: Outpatient Care		90832		Encounter	139	187	\$14,936	\$107	\$80	1
Mercal Health Outgrainer Care   9083   US   Encounter   638   5,845   \$490,077   \$710   \$348   \$9.00   \$0.00	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mental Health Cutputient Care	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Curpartent Care   (901, 1904, 1904)   90834   Encounter   0   0   50   50   50   50   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Massamen	Mental Health: Outpatient Care		90834		Encounter	638	5,845	\$490,627	\$769	\$84	9
Assessment for Authin	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care   90837   Encounter 20-30 Min   243   822   \$256,897   \$1,057   \$313   3   3   3   3   3   3   3   3   3	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Ass	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	243	822	\$256,897	\$1,057	\$313	3
Assessment for Autism  90838  U5 Encounter 45-50 Min  0 0 0 50 50 50 50 0  Psychotherapy for Crisis First 60 Minutes  90839  Encounter 45-50 Min  0 0 0 50 50 50 50 0  Sychotherapy for Crisis Each Additional 30 Minutes  90840  Encounter 45-50 Min  90 0 0 50 50 50 50 0  Sychotherapy for Crisis Each Additional 30 Minutes  90840  Encounter 75-80 Min  92 170  S20,264  S20,205 119 2  Substance Abuse: Outputient Treatment  000,0006,0914, 0916,0919  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916  1015,0916,0916	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pychotherpay for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   92   170   \$20,264   \$220   \$5119   2	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 75-80 Min         0         0         \$0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	92	170	\$20,264	\$220	\$119	2
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0019         90847         Encounter 75-80 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90846</td><td></td><td>Encounter 75-80 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	336	1,095	\$91,697	\$273	\$84	3
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9081   9087   Encounter 45-50 Min   148   604   \$40,301   \$272   \$67   48   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$272   \$67   \$4   \$604   \$40,301   \$605   \$60   \$	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	148	604	\$40,301	\$272	\$67	4
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         9087         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506	-	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

#### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Children with Serious Emotional Disturbance

Bay-Arenac	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue code		Wiodifici							
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	12	50	\$10,094	\$841	\$202	4
Assessment for Autism		96101	U5	Encounter 75-80 Min	2	6	\$1,089	\$544	\$181	3
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	3	7	\$320	\$107	\$46	2
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	1	4	\$103	\$103	\$26	4
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Personant Politik Spricks   9781	Bay-Arenac				Unit						
Parameter   Fleath Berries   9780   Para Hour   0   0   30   30   90   90   90   90	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Part	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Selbituster Abson. Acquestreties   9781   Excession   0 0 0 30 50 50 50 50 50 50 50 50 50 50 50 50 50	Health Services		97804			0	0	\$0	\$0	\$0	0
No. Pacian Foundation and Management   99,001   15   16mer   0   0   150   1	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   9200   U5   Hear   0   0   0   30   30   30   30   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99222   U.5   Hour   0   0   50   50   50   0	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Anthrian   99201   U5   Heur   0   0   50   50   50   0   0	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Foulantion and Management   99201	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Authism	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Solitation Attors: New Patient Evaluation and Management   99204   Encounter   13   13   \$3,368   \$2.99   \$2.99   1	New Patient Evaluation and Management		99203		Per Hour	1	1	\$173	\$173	\$173	1
New Patient Evaluation and Management	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
New Seasonant for Autism   99204   U5   Per Hour   0   0   80   50   50   50   0	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Parkent Evaluation and Management   99204   Per Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99204		Encounter	13	13	\$3,368	\$259	\$259	1
New Patient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Aurism   99205   U5   Per Hour   0   0   50   50   50   50   0	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Destationary Alasier   Parlametric Nationary   Parlametric   Parlametr	New Patient Evaluation and Management		99205		Hour	2	2	\$696	\$348	\$348	1
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   S0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   23   32   \$3,322   \$144   \$104   1	Established Patient Evaluation and Management		99211		Per Hour	6	6	\$298	\$50	\$50	1
Assessment for Autism   99212   U.5   Encounter   0   0   50   50   50   0   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   0   50   50   50   0   0   0	Established Patient Evaluation and Management		99212		Encounter	23	32	\$3,322	\$144	\$104	1
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   396   751   \$191,013   \$482   \$254   2     Assessment for Autism   99214   U5   15 Minutes   0   0   \$50   \$50   \$50   0     Established Patient Evaluation and Management   99215   15 Minutes   8   10   \$33,173   \$397   \$317   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$50   \$50   \$50   \$0   \$0     Additional Codes-Physician Services   99221   15 Minutes   1   1   \$102   \$102   \$102   \$102   \$102     Additional Codes-Physician Services   99222   15 Minutes   64   80   \$10,735   \$168   \$134   1     Additional Codes-Physician Services   99223   Encounter   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99231   15 Minutes   7   13   \$574   \$82   \$44   2     Additional Codes-Physician Services   99231   15 Minutes   7   13   \$574   \$82   \$44   2     Additional Codes-Physician Services   99231   15 Minutes   64   477   \$33,98   \$531   \$71   7     Additional Codes-Physician Services   99231   15 Minutes   64   477   \$33,98   \$531   \$71   7     Additional Codes-Physician Services   99231   15 Minutes   31   91   \$9,480   \$306   \$104   3     Assessment   99334   15 Minutes   0   0   50   50   50   50   50   50	Established Patient Evaluation and Management		99213		Encounter	515	1,497	\$247,940	\$481	\$166	3
Assessment for Autism         99214         U5         15 Minutes         0         0         50         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$3,173         \$397         \$317         \$1           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Stabilished Patient Evaluation and Management   99215   15 Minutes   8   10   \$3,173   \$397   \$317   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	396	751	\$191,013	\$482	\$254	2
Assessment for Autisim         99215         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         1         1         \$102         \$102         \$102         \$102         \$1           Additional Codes-Physician Services         99222         15 Minutes         64         80         \$10,735         \$168         \$134         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	8	10	\$3,173	\$397	\$317	1
Additional Codes-Physician Services         99222         15 Minutes         64         80         \$10,735         \$168         \$134         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	1	1	\$102	\$102	\$102	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	64	80	\$10,735	\$168	\$134	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         7         13         \$574         \$82         \$44         2           Additional Codes-Physician Services         99232         15 Minutes         64         477         \$33,998         \$531         \$71         7           Additional Codes-Physician Services         99233         15 Minutes         31         91         \$9,480         \$306         \$104         3           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         64         477         \$33,998         \$531         \$71         7           Additional Codes-Physician Services         99233         15 Minutes         31         91         \$9,480         \$306         \$104         3           Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99226</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9923         15 Minutes         31         91         \$9,480         \$306         \$104         3           Assessment         99324         15 Minutes         0         0         \$0         <	Additional Codes-Physician Services		99231		15 Minutes	7	13	\$574	\$82	\$44	2
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>64</td> <td>477</td> <td>\$33,998</td> <td>\$531</td> <td>\$71</td> <td>7</td>	Additional Codes-Physician Services		99232		15 Minutes	64	477	\$33,998	\$531	\$71	7
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	31	91	\$9,480	\$306	\$104	3
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

A0110

A0110

#### Children with Serious Emotional Disturbance

#### Bay-Arenac Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Assessment for Autism 99325 U5 15 Minutes 0 0 \$0 \$0 \$0 0 99326 0 0 \$0 \$0 \$0 0 Assessment 15 minutes 99326 U5 0 \$0 \$0 \$0 15 Minutes 0 0 Assessment for Autism 99327 15 Minutes 0 0 \$0 \$0 \$0 0 Assessment 99327 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism 30 Minutes 99328 0 0 \$0 \$0 \$0 0 Encounter Assessment Assessment for Autism 99328 U5 Encounter 0 0 \$0 \$0 \$0 0 Assessment 99334 Encounter 0 0 \$0 \$0 \$0 0 Assessment for Autism 99334 U5 Encounter 0 0 \$0 \$0 \$0 0 Assessment 99335 Encounter 0 0 \$0 \$0 \$0 0 99335 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 99336 0 0 \$0 \$0 \$0 0 Assessment Encounter U5 0 Assessment for Autism 99336 Encounter 0 \$0 \$0 \$0 0 Assessment 99337 Encounter 0 0 \$0 \$0 \$0 0 99337 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 0 \$0 \$0 0 Assessment 99341 Encounter 0 \$0 99341 0 0 \$0 \$0 \$0 0 Assessment for Autism U5 Encounter 99342 0 0 \$0 \$0 \$0 Assessment Encounter 0 Assessment for Autism 99342 U5 Encounter 0 0 \$0 \$0 \$0 0 99343 0 0 \$0 \$0 \$0 0 Assessment Encounter 99343 U5 0 0 \$0 \$0 \$0 0 Encounter Assessment for Autism 99344 0 \$0 \$0 \$0 Encounter 0 0 Assessment U5 0 99344 0 \$0 \$0 \$0 0 Assessment for Autism Encounter Assessment 99345 Encounter 0 0 \$0 \$0 \$0 0 Assessment for Autism 99345 U5 Encounter 0 0 \$0 \$0 \$0 0 99347 0 0 \$0 \$0 \$0 0 Assessment Encounter 99347 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 0 \$0 0 \$0 \$0 0 Assessment 99348 Encounter Assessment for Autism 99348 U5 0 0 \$0 \$0 \$0 0 Encounter Assessment 99349 Encounter 0 0 \$0 \$0 \$0 0 U5 0 \$0 \$0 \$0 Assessment for Autism 99349 30 Minutes 0 0 99350 0 0 \$0 \$0 \$0 0 Assessment 50 Minutes 0 99350 U5 0 \$0 \$0 \$0 0 Assessment for Autism 70 Minutes Medication Administration 99506 15 Minutes 0 0 \$0 \$0 \$0 0 Medication Management 99605 35 Minutes 0 0 \$0 \$0 \$0 0 Transportation A0080 15 Minutes 0 0 \$0 \$0 \$0 0 A0090 0 0 \$0 \$0 \$0 0 Transportation 25 minutes 0 \$0 \$0 \$0 Transportation A0100 35 Minutes 0 0 Substance Abuse: Transportation A0100 Encounter 0 0 \$0 \$0 \$0 0

Encounter

Encounter

SUB-ELEMENT COST REPORT: Fiscal Year 2014

0

0

0

0

\$0

\$0

\$0

\$0

Transportation

Substance Abuse: Transportation

0

0

\$0

\$0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Note	Bay-Arenac				Unit						
Percentation	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Engeneration	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Marcian   Marc	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Matheman   Matheman	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Meditane Medicale Temperatain	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Paully Training Support RSP Only	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services   10001   1000000000000000000000000000	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Machaner   Marcol   Machaner   Marcol   Machaner   Ma	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Assistance Abuse Cales Annex Patrice   19002   Encounter   257   288   \$32,052   \$125   \$111   1   1   1   1   1   1   1   1	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abson: Chaptainer Teatment	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Curpatient Treatment	Assessment		H0002		Encounter	257	288	\$32,052	\$125	\$111	1
Distance Abuse: Cutputient Teament   Dist, Option, Option   Distance Abuse: Cutputient Teament   Distance Abuse: Cutput Teament	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Distance Above: Case Management   1000   1001   1	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0010         Encounter         0         0         \$0	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Absess: Sub-Acute Detoxification   1002   H0012   Encounter   0   0   S0   S0   S0   S0   0   Substance Abses: Sub-Acute Detoxification   1002   H0014   Encounter   0   0   0   S0   S0   S0   S0   0   O   Substance Abses: Sub-Acute Detoxification   1002   H0015   Encounter   0   0   0   S0   S0   S0   S0   O   O   S0   S0	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   H0014   Encounter   0   0   S0   S0   S0   S0   0   Substance Abuse: Outpatient Care   0   0   0   S0   S0   S0   S0   0   O   Substance Abuse: Residential Services   H0018   Encounter   0   0   S0   S0   S0   S0   S0   S0	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outputient Care   0906   H0015   Encounter   0   0   50   50   50   50   0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services         H0018         Encounter         0         0         S0         S0         S0         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Methadone         H0020         Encounter         0         0         50         50         50         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         50         50         50         0           Peer Directed and Operated Support Services         H0023         Encounter         0         0         50         50         50         50         0           Prevention Services - Direct Model         H0025         Encounter         0         0         50         50         50         50         0           Crisis Intervention         H0031         Encounter         0         0         50         50         50         50         0           Crisis Intervention         H0031	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         \$0	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   1000   100	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone         H0020         Encounter         0         0         \$0	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$10         \$10         \$10         \$10         \$10         \$189         \$189         \$189         \$1           Assessment for Autism         H0031         U5         Encounter         7         \$12         \$5,594         \$799         \$466         \$2           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         513         540         \$101,859         \$199         \$189         1           Assessment for Autism         H0031         U5         Encounter         7         12         \$55,594         \$799         \$466         2           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   H0031   U5   Encounter   7   12   \$5,594   \$799   \$466   2	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$158         \$1           Treatment Planning         H0032         TS         Encounter         0         0         \$0 <td< td=""><td>Assessment</td><td></td><td>H0031</td><td></td><td>Encounter</td><td>513</td><td>540</td><td>\$101,859</td><td>\$199</td><td>\$189</td><td>1</td></td<>	Assessment		H0031		Encounter	513	540	\$101,859	\$199	\$189	1
Treatment Planning         H0032         Encounter         530         566         \$89,445         \$169         \$158         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Assessment for Autism		H0031	U5	Encounter	7	12	\$5,594	\$799	\$466	2
Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	530	566	\$89,445	\$169	\$158	1
Health Services         H0034         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,118,907         \$5,458         \$71         77           Home Based Services         H0036         ST         Encounter         0         0         \$0 <td>Monitoring of Treatment - Clinician</td> <td></td> <td>H0032</td> <td>TS</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         Encounter         205         15,833         \$1,118,907         \$5,458         \$71         77           Home Based Services         H0036         \$T         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	205	15,833	\$1,118,907	\$5,458	\$71	77
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
· II	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 \$0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processing Segrets   Process	Bay-Arenac				Unit						
Communicy Josing Supports in Balance   BEAS   Bacouster   0   0   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   1982	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Non-District and Cycentral Support Services   M046   Processor   0   0   9   9   50   50   0	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selt-stance Abec Libersity   1888   Ecousier   0   0   59   30   50   50   50   50   50   50   50	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Abec Opposed Transmert   DOM, OMC, OME, A   DOM, OMC, OME, OME, OME, OME, OME, OME, OME, OME	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Part	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Relativist Transmer Plus Broker's Modiforing Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptionaire Multication Services - EBP only   12011	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Colis Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	1	1	\$84	\$84	\$84	1
Stall-Building and Out of Home Non Vocational Hisblitation   H2014   Encounter   1   18   5119   5119   57   18	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutos)	Crisis Intervention		H2011		Encounter	49	139	\$11,216	\$229	\$81	3
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	1	18	\$119	\$119	\$7	18
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	26	22,706	\$119,731	\$4,605	\$5	873
Dehavor Services   112016   TG   Per mile   1   139   \$53,472   \$385   139	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	1	139	\$53,472	\$53,472	\$385	139
Part   Intensive Behavioral Intervention (EIB1)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	2	1,108	\$8,441	\$4,220	\$8	554
Margaround (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wingaround (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound (SED Waiver)	Wraparound		H2021		Per one-way trip	4	169	\$40,139	\$10,035	\$238	42
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs   H2030   Refer to code descriptions.   0   0   S0   S0   S0   D0	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0905, 0916, 0919   H2036   Encounter Session at least 45 min   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$3         \$3,624         \$69         \$3           Family Training - EBP         \$5110         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>S0209</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         2         105         \$7,248         \$3,624         \$69         53           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$10         \$10         \$10         \$10         \$10         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         40         192         \$19,471         \$487         \$101         5           Family Training         \$5111         HA         Days         0         0         \$	Home Care Training to Home Care Client		S5108	U5	Encounter	2	105	\$7,248	\$3,624	\$69	53
Family Training S5111 HA Days 0 0 \$0 \$0 \$0 \$0 0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	40	192	\$19,471	\$487	\$101	5
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Bay-Arenac			Unit						
Service Category	Revenue Code HCPC	S Code Modifie	r Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S51	40	Days	0	0	\$0	\$0	\$0	0
Foster Care	S51	15	Days	0	0	\$0	\$0	\$0	0
Respite	S51	50	Days	0	0	\$0	\$0	\$0	0
Respite	S51	51	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S51	50	Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S51	51	Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S51	55	Face to Face Contac	et 0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S51	99	Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S89	90	Encounter	0	0	\$0	\$0	\$0	0
Health Services	S94	15	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S94	16	15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S94	70	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S94	32		0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	S94	34	15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S99	76	Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S99	76	Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00 TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00 TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T10	01	Encounter	180	180	\$59,221	\$329	\$329	1
Health Services	T10	02	15 Minutes	19	21	\$2,478	\$130	\$118	1
Respite Care	T10	05	Encounter	10	3,236	\$8,352	\$835	\$3	324
Respite Care	T10	05 TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T10	05 TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T10	05 TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T10	09	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T10	12	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T10	15	Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T10	16	Per Diem	82	757	\$95,595	\$1,166	\$126	9
Targeted Case Management	T10	17	Per Diem	213	3,920	\$339,284	\$1,593	\$87	18
Nursing Home Mental Health Monitoring	T10	17 SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20 TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20 TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T10	23	15 Minutes	143	200	\$120,759	\$844	\$604	1
Prevention Services - Direct Model	T10	27	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T19	99	Days	0	0	\$0	\$0	\$0	0
Transportation	T20	01	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	01	15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T20	02	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	02	15 Minutes	0	0	\$0	\$0	\$0	0

Bay-Arenac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	1	3	\$383	\$383	\$128	3
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	19	97	\$3,457	\$182	\$36	5
Respite Care		T2037		Days	1	18	\$311	\$311	\$17	18
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					1,129		\$4,428,826			

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Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	6	273	\$60,879	\$10,147	\$223	46
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	18	157	\$120,127	\$6,674	\$765	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	18	122	\$85,253	\$4,736	\$699	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	1	1	\$260	\$260	\$260	1
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

# turbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Captery	Berrien				Unit						
Assessment   MOPI   U.S.   L.D.   L	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Asserment 16 Austrian 90791 US Ecounter 147 148 1593,96 3333 0 1 Asserment 90702 Ecounter 147 148 1593,96 3335 3331 0 1 Asserment 90702 US Ecounter 0 0 0 150 20 0 0 150 30 0 0 0 1 Asserment 16 Austrian 90702 US Ecounter 100 134 1516,02 5360 319 0 0 Substance Abover Computent Care 90832 Ecounter 100 134 1516,02 5360 319 0 0 Substance Abover Computent Care 90833 US Ecounter 0 0 0 150 0 0 150 0 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Menuscuer   9077   Necessary   147   148   1979   1576   1573   1	Assessment		90791			12	12	\$3,342	\$278	\$278	1
Secondary for Autism	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	147	148	\$49,349	\$336	\$333	1
Substance above: Outputient Cure	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mescanetic Fir Administr   Mescanetic Fir Admi	Mental Health: Outpatient Care		90832		Encounter	100	134	\$16,012	\$160	\$119	1
Assessment for Authins	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Moreal Health Congratient Care	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Subtrance abuse: Outputient Care   6903, 1904, 6914, 6915,	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mackassment   Marcha   March	Mental Health: Outpatient Care		90834		Encounter	272	734	\$116,605	\$429	\$159	3
Assessment for Autism   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care   59037   Encounter 20-30 Min   303   868   \$172.255   \$5568   \$198   3	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care   90837   Encounter 20-30 Min   0   0   50   50   50   0   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   September   Sep	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	303	868	\$172,255	\$568	\$198	3
Assessment for Autism 90888 U5 Encounter 45-50 Min 0 0 0 \$0 \$0 \$0 \$0 \$0 0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$00	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915   90847   Encounter 75-80 Min   0   0   S0   S0   S0   S0   0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	13	14	\$3,295	\$253	\$235	1
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   S0   S0   S0   S0   0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Family Therapy		90847		Encounter 75-80 Min	75	577	\$139,128	\$1,855	\$241	8
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   Encounter 45-50 Min   0   0   0   50   50   50   50   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   50   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	5	21	\$2,605	\$521	\$124	4
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)	·	92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	1	\$0	\$0	\$0	1
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	2	22	\$1,778	\$889	\$81	11
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$173	\$173	\$173	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	1	80	\$1,213	\$1,213	\$15	80
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	1	1	\$330	\$330	\$330	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	17	18	\$1,150	\$68	\$64	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	11	11	\$1,221	\$111	\$111	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	394	1,040	\$200,849	\$510	\$193	3
Assessment for Autism		99213	U5	Encounter	1	1	\$220	\$220	\$220	1
Established Patient Evaluation and Management		99214		15 Minutes	19	27	\$5,672	\$299	\$210	1
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	2	2	\$464	\$232	\$232	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	9	10	\$868	\$96	\$87	1
Additional Codes-Physician Services		99222		15 Minutes	11	11	\$948	\$86	\$86	1
Additional Codes-Physician Services		99223		Encounter	4	4	\$345	\$86	\$86	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	8	19	\$1,279	\$160	\$67	2
Additional Codes-Physician Services		99232		15 Minutes	12	45	\$3,804	\$317	\$85	4
Additional Codes-Physician Services		99233		15 Minutes	11	29	\$2,500	\$227	\$86	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Processor   Proc	Berrien				Unit						
Assertment   99.26   15 minutes   0   0   59   30   50   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Accounter for Authors	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Avenument for Authorn 9927 US 30 Maneres 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9927 US 30 Maneres 0 0 0 90 90 90 90 0 0 Accounter for Authorn Association for Authorn 9928 UE Processor 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 UE Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Processor 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 90 90 90 90 90 0 0 Accounter for Authorn 9928 US Excounter 0 0 0 90 90 90 90 90 90 0 0 Accounter f	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Accounter fix Admins 9737 US SIMENUES 0 0 9 91 91 91 91 0 0 Accounter 9738 US Focusior 0 0 0 93 93 93 93 0 0 Accounter fix Admins 9738 US Focusior 0 0 0 93 93 93 93 91 0 Accounter fix Admins 9738 US Focusior 0 0 0 93 93 93 93 0 0 Accounter fix Admins 9738 US Focusior 0 0 0 93 93 93 93 0 0 Accounter fix Admins 9735 US Excessor 0 0 0 93 93 93 93 90 0 Accounter fix Admins 9735 US Excessor 0 0 0 93 93 93 93 0 0 Accounter fix Admins 9736 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9737 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9737 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9737 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9731 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 90 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounter fix Admins 9734 US Excessor 0 0 0 93 93 93 93 0 Accounte	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Accounter Audation 99238 US Encounter 0 0 0 59 59 59 50 50 0 0 Accounter Audation 99238 US Encounter 0 0 0 59 59 59 50 50 0 0 Accounter Audation 99234 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99234 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99235 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99235 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99235 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99235 US Encounter 0 0 0 59 59 59 50 0 0 Accounter Audation 99235 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99237 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99234 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99242 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99242 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99244 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99244 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99244 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99247 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99248 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 50 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 50 50 0 0 0 Accounter 6 Audation 99249 US Encounter 0 0 0 59 59 59 59 50 0	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Ansimm	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austran	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Accessment for Aurism	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn Assessment for Factorism Assessment for Factoris	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authirm 99336  Assessment for Authirm 99337  Assessment for Authirm 99337  Assessment for Authirm 99337  Becounter 0 0 0 5 5 5 5 0 0 Assessment for Authirm 99337  US Executiver 0 0 0 5 5 5 5 0 0 Assessment for Authirm 99337  US Executiver 0 0 0 5 5 5 0 0 0 Assessment for Authirm 99337  US Executiver 0 0 0 5 5 5 0 0 0 Assessment for Authirm 99337  US Executiver 0 0 0 5 5 0 0 0 Assessment for Authirm 99341  US Executiver 0 0 0 0 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Spain	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Accessment for Authism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Antism	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99347 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99341 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99343 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 US Biccounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 US Biccounter 0 0 80 80 80 80 0 Assessment for Autism 99349 US Biccounter 0 0 80 80 80 80 0 Assessment for Autism 99349 US Biccounter 0 0 80 80 80 80 0 Assessment for Autism 99349 US Biccounter 0 0 80 80 80 80 0 Assessment for Autism 99340 US To Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 80 0 Assessment for Autism 99350 US TO Minutes 0 0 0 80 80 80 80 80 80 80 80 80 80 80 8	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Authin 99341 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9342 D5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 D6 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9345 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9347 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9348 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 9349 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9349 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9349 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minutes 0 0 0 50 50 50 50 50 50 0 Assessment for Autism 0 9350 U5 So Minut	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Sessment	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 50 50 50 50 0 0 Assessment of Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   50   50   50   50   0	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   50   50   50   0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99344         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99345         Encounter         0         0         SO	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         Encounter         0         0         50         50         50         0           Assessment for Autism         99345         U5         Encounter         0         0         50         50         50         0           Assessment         99347         U5         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         Bnounter         0         0         50         50         50         0           Assessment for Autism         99350         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Assessment for Autism	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99347         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         Bnounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         SO         O         O         SO         SO         SO         SO         O         O         SO	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         SO Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Medication Administration         99506         15 Minutes         0         0         SO         SO         SO         SO         SO         O           Transportation         A0080         15 Minutes         0<	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         50         0           Assessment         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         50         50         50	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	2	2	\$299	\$149	\$149	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	1	1	\$337	\$337	\$337	1
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	556	567	\$147,313	\$265	\$260	1
Assessment for Autism		H0031	U5	Encounter	4	5	\$7,415	\$1,854	\$1,483	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	3	3	\$527	\$176	\$176	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	185	14,282	\$1,271,732	\$6,874	\$89	77
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Personant   Pers	Berrien				Unit						
Community Flating Agopton in Michagenest Integriven home   18043   Encounter   0   0   59   59   50   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Description	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
September   Sept	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Lebonatory   10081	Respite		H0045		Encounter	2	20	\$4,727	\$2,363	\$236	10
Pathware Abuse: Comparison Treatment Pathware (1916, 1916, 1917)   Pathware Treatment Pathware (1916, 1916, 1917)   Pathware Treatment Pathware (1916, 1917)   Path	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Public   P	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Relativist Transmer Plan Review - Monitaring Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptionies Medications Services - ERP only   H2010   Brocunter   0   0   50   50   50   50   50   50	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Criss   Intervention   1201	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill-Bulding and Our of Home Non Vocational Habilitation   H2014   Encounter   0   0   50   50   50   50   50   50	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
	Crisis Intervention		H2011		Encounter	9	45	\$1,354	\$150	\$30	5
Community Living Supports (Dally)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	9	7,912	\$25,529	\$2,837	\$3	879
Community Living Supports (Daily)   H2016   TG   Per mile   0   0   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Servies	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).         H2019         U.5         Per one-way trip         0         0         50         50         50         0           Early Intensive Behavioral Intervention (EIBI)         H2019         U.5, TG         Per one-way trip         0         0         50         50         50         0           Cisis Intervention         H2020         Per one-way trip         0         0         50         50         50         0           Wraparound         H2021         Per one-way trip         0         0         50         50         50         0           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         50 <td>Community Living Supports (Daily)</td> <td></td> <td>H2016</td> <td>TG</td> <td>Per mile</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound Marparoun	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Menparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	1	19	\$6,590	\$6,590	\$347	19
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubbouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   H2036   Encounter Session at least 45 min   H2036   H203	Home Based Services		H2033		Items	36	5,364	\$435,377	\$12,094	\$81	149
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         \$25         15 Minutes         0         0         \$50         \$50         \$0         0           Home Care Training to Home Care Client         \$5108         U5         Encounter         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         50         \$0         \$0         0           Family Training - EBP         S5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training S5111 HM Days 0 0 \$0 \$0 \$0 0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$71	\$71	\$71	1
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	4	2,481	\$7,504	\$1,876	\$3	620
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	1	209	\$695	\$695	\$3	209
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	16	224	\$36,002	\$2,250	\$161	14
Targeted Case Management		T1017		Per Diem	70	3,475	\$320,924	\$4,585	\$92	50
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	172	221	\$86,729	\$504	\$392	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

### Berrien Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2003 Hour 0 Transportation T2004 Per Diem 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2004 15 Minutes 0 0 \$0 \$0 \$0 0 Transportation T2005 Encounter Face-to-Face, 0 0 \$0 \$0 \$0 0 generally less than 10 minutes Substance Abuse Services: Transportation T2005 Per Mile 0 0 \$0 \$0 \$0 0 T2024 0 0 \$0 \$0 \$0 0 Prevention Services - Direct Model 15 Minutes T2025 27 \$2,234 14 Fiscal Intermediary Services 15 Minutes 2 \$4,468 \$165 Enhanced Medical Equipment-Supplies T2028 0 0 \$0 \$0 \$0 Encounter 0 T2029 0 \$0 \$0 Enhanced Medical Equipment-Supplies Encounter 0 \$0 0 Crisis Intervention T2034 Encounter 0 0 \$0 \$0 \$0 0 Respite Care T2036 Encounter 0 0 \$0 \$0 \$0 0 T2037 0 0 \$0 \$0 \$0 0 Respite Care Days 0 \$0 T2038 0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies T2039 15 Minutes 0 0 \$0 \$0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

\$0 Pharmacy (Drugs and Other Biologicals) Encounter 0 0 \$0 \$0 Other 0 0 \$0 \$0 \$0 Month Aggregate for 'J' Codes ALL Service 2 0 \$5,918 \$2,959 \$0 1,016 **Total Population and Cost** \$3,355,435

State of Michigan

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Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		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	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
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SUB-ELEMENT COST REPORT: Fiscal Year 2014

Cilidren with Serious Emotional Distui	Dance			OD-LLLINLINI COST IX	LI OIVI. FISCAI	1 cai 2014				
Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy	-	97762		Encounter	0	0	\$0	\$0	\$0	0

Personal Processing   Personal Processing	Clinton Eaton Ingham				Unit						
Assessment of Fallis Services   79700   East Hoor   0   0   93   93   50   0   0   1   1   1   1   1   1   1	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Paralle Name   1970    1970	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Mariane Abse: Apogueurer	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Submare Abase: Assignment	Health Services		97804			0	0	\$0	\$0	\$0	0
New Planest Evolutions and Management	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Patent Evaluation and Management   99201   U5   Hour   0   0   50   50   50   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
Seer Placeal Evolution and Management   99202   Per Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Accounter for Authors	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99/201	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Authinn    Assessment for Authinn   92033   US   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Solution Assers: New Patient Evaluation and Management	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99204 US Per Hour 0 0 0 50 50 50 50 50 0 0 5 5 5 5 5 5 5	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Sobstance Abuss: New Parkent Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 0 Substance Abuser. New Patient Evaluation and Management 99205 Hour 0 0 0 50 50 50 50 0 0 0 Substance Abuser. New Patient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management 99211 U.5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   50   50   50   0   0   Established Parient Evaluation and Management   99212   U5   Encounter   0   0   50   50   50   50   0   0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management 99212 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99213 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   0   0   S0   S0   S0   S0   S0   S0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99213   U5   Encounter   0   0   0   50   50   50   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99214         U5         15 Minutes         0         0         SO         SO         SO         O           Established Patient Evaluation and Management         99215         15 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99215         U5         15 Minutes         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99221         15 Minutes         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99222         15 Minutes         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99223         Encounter         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99224         15 Minutes         0         0         SO         SO         SO         SO         O           Additional Codes-Physician Services         99225         15 Minutes         0         0         SO         SO         SO         SO	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism         99215         U5         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         50         50         50         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         50         50         50         0           Assessment         99324         15 Minutes <td< td=""><td>Assessment for Autism</td><td></td><td>99214</td><td>U5</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         \$0         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         50         50         50         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99233         15 Minutes         0         0         50         50         50         0           Assessment         99324         15 Minutes <td>Established Patient Evaluation and Management</td> <td></td> <td>99215</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99222         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         \$	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment	·	99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Clinton Eaton Ingham	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code		Woullei	Measure						
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0
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# al Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	0	0	\$0	\$0	\$0	0
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		Per Diem	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		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	

# SUB-ELEMENT COST REPORT: Fiscal Year 2014 Clinton Eaton Ingham

Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					0		\$0			

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

CMH for Central Michigan				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	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	C
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	7	74	\$49,252	\$7,036	\$666	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	35	386	\$294,233	\$8,407	\$762	11
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	(
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Securic Processor   Processo	CMH for Central Michigan				Unit						
Mesement	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Maresiment for Audition	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Sectiones   9782   Biocenter   0   0   0   30   30   30   0   0   0	Assessment		90791			223	225	\$172,118	\$772	\$765	1
Second For Author	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	0	0	\$0	\$0	\$0	0
Marian   M	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mesement   9833	Mental Health: Outpatient Care		90832		Encounter	55	75	\$6,082	\$111	\$81	1
Secounter for Authorn   90831   U5   Excounter   0   0   90   90   90   90   90   90	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outputient Care   (900, 9006, 00)44   (905, 00)16   (	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   908156   1500	Mental Health: Outpatient Care		90834		Encounter	121	328	\$37,090	\$307	\$113	3
Assessment for Authin	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care   90837   Encounter 20-30 Min   204   789   \$124,565   \$611   \$158   4	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   99837   Excounter 25:30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   September   Sep	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	204	789	\$124,565	\$611	\$158	4
Assessment for Autism   90838	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   214   547   \$81.504   \$381   \$149   3	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 75-80 Min         0         0         80         80         80         0           Therapy-Family Therapy         90847         Encounter 75-80 Min         715         4,953         \$701,148         \$981         \$142         7           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 20-30 Min         0         0         \$0<	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	214	547	\$81,504	\$381	\$149	3
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 75-80 Min         0         0         80         80         80         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         80         50         50         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         50         50         50         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         50         50         50         0           Therapy-Group Therapy         90853         Encounter 20-30 Min         8         42         \$1,539         \$192         \$37         5           Substance Abuse: Outpatient Treatment         9900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	715	4,953	\$701,148	\$981	\$142	7
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   50   50   50   50   50	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9081   90870   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	8	42	\$1,539	\$192	\$37	5
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         2         2         \$1,358         \$679         \$679         1           Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td></td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         1         9         \$923         \$923         \$103         9           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0         <	Assessments-Other		90887		Encounter 75-80 Min	2	2	\$1,358	\$679	\$679	1
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	1	9	\$923	\$923	\$103	9
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

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CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	1	\$164	\$0	\$164	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	5	11	\$2,494	\$499	\$227	2
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$191	\$191	\$191	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	1	24	\$616	\$616	\$26	24
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	1	1	\$145	\$145	\$145	1
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	8	10	\$2,177	\$272	\$218	1
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	4	4	\$1,285	\$321	\$321	1
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	1	1	\$465	\$465	\$465	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	7	7	\$4,125	\$589	\$589	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	88	123	\$13,814	\$157	\$112	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	341	952	\$182,680	\$536	\$192	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	224	596	\$170,319	\$760	\$286	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	59	88	\$40,641	\$689	\$462	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	1	1	\$100	\$100	\$100	1
Additional Codes-Physician Services		99222		15 Minutes	24	30	\$3,992	\$166	\$133	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	7	8	\$309	\$44	\$39	1
Additional Codes-Physician Services		99232		15 Minutes	22	158	\$11,166	\$508	\$71	7
Additional Codes-Physician Services		99233		15 Minutes	9	34	\$3,470	\$386	\$102	4
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

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CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	1,111	1,171	\$290,602	\$262	\$248	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	736	1,078	\$138,534	\$188	\$129	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	342	30,965	\$1,950,177	\$5,702	\$63	91
Home Based Services		H0036	ST	Encounter	4	304	\$11,996	\$2,999	\$39	76
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

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CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	33	261	\$12,914	\$391	\$49	8
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	244	1,056	\$134,411	\$551	\$127	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	47	8,223	\$43,241	\$920	\$5	175
Community Living Supports (15 Minutes)		H2015		Encounter	14	31,841	\$131,533	\$9,395	\$4	2,274
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	1	202	\$62,729	\$62,729	\$311	202
Behavior Services		H2019		Per mile	28	1,889	\$34,315	\$1,226	\$18	67
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	18	925	\$52,071	\$2,893	\$56	51
Wraparound (SED Waiver)		H2022		Per one-way trip	5	70	\$16,430	\$3,286	\$235	14
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	21	4,710	\$322,890	\$15,376	\$69	224
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	2	41	\$3,588	\$1,794	\$88	21
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	7	22	\$6,150	\$879	\$280	3
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	52	390	\$113,439	\$2,182	\$291	8
<del></del>										

CMH for Central Michigan				Unit						
Service Category	Revenue Code HCP	CS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S5	40		Days	0	0	\$0	\$0	\$0	0
Foster Care	S5	45		Days	0	0	\$0	\$0	\$0	0
Respite	S5	50		Days	0	0	\$0	\$0	\$0	0
Respite	S5	51		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S5	60		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S5	61		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5	65		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5	99		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8:	90		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9-	45		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S9-	46		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S9-	70		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9-	82			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	S9-	84		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9:	76		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9:	76		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1	000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1	000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1	000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1	001		Encounter	0	0	\$0	\$0	\$0	0
Health Services	T1	002		15 Minutes	3	8	\$744	\$248	\$93	3
Respite Care	T1	005		Encounter	45	26,721	\$26,516	\$589	\$1	594
Respite Care	T1	005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1	005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1	005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T1	009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T1	012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1	015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1	016		Per Diem	29	347	\$30,052	\$1,036	\$87	12
Targeted Case Management	T1	017		Per Diem	66	1,176	\$113,505	\$1,720	\$97	18
Nursing Home Mental Health Monitoring	T1	017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1	)20		15 Minutes	1	202	\$790	\$790	\$4	202
Personal Care in Licensed Specialized Residential Setting	T1	)20	TF	15 Minutes	5	9	\$445	\$89	\$49	2
Personal Care in Licensed Specialized Residential Setting	T1	)20	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1	)23		15 Minutes	157	207	\$210,783	\$1,343	\$1,018	1
Prevention Services - Direct Model	T1	)27		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1	199		Days	0	0	\$0	\$0	\$0	0
Transportation	T2	001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2	001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2	002		15 Minutes	54	20,542	\$11,295	\$209	\$1	380
Substance Abuse Services: Transportation	T2	002		15 Minutes	0	0	\$0	\$0	\$0	0

CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	97	658	\$6,567	\$68	\$10	7
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	25	167	\$13,958	\$558	\$84	7
Respite Care		T2037		Days	19	336	\$6,476	\$341	\$19	18
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					1,744		\$5,654,113			

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Copper Country	D G 1	Habar a 1	M 115	Unit		***		0.10	C all i	11:00
Service Category	Revenue Code	HCPCS Code	Modifier	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	(
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	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	11	139	\$104,889	\$9,535	\$755	13
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	\$0	C
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	1	23	\$12,802	\$12,802	\$557	23
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	C
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	C
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	(
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	(
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	(
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	(
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	(
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	(

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Capeary   Service Ca	Copper Country				Unit						
Assessment   100   10   10   10   10   10   10	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment   90791   US	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Secretaries   9070   Processor   5   S   SK170   SL624   SL624   1	Assessment		90791			0	0	\$0	\$0	\$0	0
Second Feath Conjunct for Autimn	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Secondary   Seco	Assessment		90792		Encounter	5	5	\$8,120	\$1,624	\$1,624	1
Substance above: Outputient Cure   O000, 0900,	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Macesseries   Miles   Miles	Mental Health: Outpatient Care		90832		Encounter	29	53	\$5,615	\$194	\$106	2
Assessment for Authins	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Moreal Health Congruisnet Care	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   0900, 0906, 0914, 0915, 0916, 0919   90834   Encounter 25-30 Min   0   0   50   50   50   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Memoral Health: Computines Care   90856   Excounter 29-30 Main   0   0   50   50   50   50   0   0	Mental Health: Outpatient Care		90834		Encounter	27	100	\$17,545	\$650	\$175	4
Accounter for Autism   90836   U5   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   90837   Encounter 25:30 Mm   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Spits	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	45	203	\$48,538	\$1,079	\$239	5
Assessment for Autisin 90888 U5 Encounter 45-50 Min 0 0 50 50 50 50 0 0 Psychotherapy for Crisis East 60 Minutes 90839 Encounter 45-50 Min 0 0 0 50 50 50 0 0 Therapy-Family Therapy 90840 Encounter 75-50 Min 1 5 30 513,418 5895 5447 2 50 50 50 50 50 50 50 50 50 50 50 50 50	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   12   21   \$7,192   \$599   \$342   2   \$2   \$2   \$2   \$2   \$2   \$2   \$	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy   90847   Encounter 75-80 Min   12   21   \$7,192   \$599   \$342   22   \$1,000   \$0,000 (1)44   90847   Encounter 75-80 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90846		Encounter 75-80 Min	15	30	\$13,418	\$895	\$447	2
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Family Therapy		90847		Encounter 75-80 Min	12	21	\$7,192	\$599	\$342	2
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   0   0   0   50   50   50   50   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assesments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
			92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0         \$0         \$0         \$0         \$0         0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Speech & Linguage Theory         \$2222         Excenter & 50 Min         0         0         50         30         50 <th>Copper Country</th> <th>Revenue Code</th> <th>HCPCS Code</th> <th>Modifier</th> <th>Unit</th> <th>Cases</th> <th>Units</th> <th>Cost</th> <th>Cost/Case</th> <th>Cost/Unit</th> <th>Unit/Case</th>	Copper Country	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Species Research Energy		Revenue Code		Wodiliei							
Speech & Language Theory	-										0
Speech & Language Theory											0
Psychological Testing PSYCLIPHYS	- <del></del>										0
Assessment for Astitism	- <del></del>										0
Psychological Tosing by Technitism	Psychological Testing PSYCH/PHYS										0
Accounter for Austim				U5							0
Psychological Testing by Compr   Solidary	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other	Assessment for Autism			U5	30 Minutes						0
Assessments Other 96110 30 Minutes 0 0 0 50 50 50 50 50 60 Assessments Other 96111 45 Minutes 0 0 0 50 50 50 50 50 60 Assessment For Australian Status Exam 96116 45 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Psych*Phys 96118 45 Minutes 0 0 0 50 50 50 50 50 50 60 60 Norropsych feel by Psych*Phys 96118 45 Minutes 0 0 0 50 50 50 50 50 50 60 60 Norropsych feel by Psych*Phys 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 60 60 Norropsych feel by Tech 96119 46 Minutes 0 0 0 50 50 50 50 50 60 60 Norropsych 96110 50 50 50 50 50 50 50 50 50 50 50 50 50	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other    Section   Secti	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropoche is de PyschPhys 90118 45 Minutes 0 0 0 50 50 50 50 60 Neuropoche is de PyschPhys 90118 U5 45 Minutes 0 0 0 50 50 50 50 50 50 50 60 Neuropoche is de PyschPhys 10 Neuropoche is de	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 50 Recropychy test by Teche 96119 U5 60 Minutes 0 0 0 50 50 50 50 60 Recropych test by Teche 96119 U5 60 Minutes 0 0 0 50 50 50 50 Recropych test Admin w/Comp 96120 Recropych test Admin w/Comp 97001 Res 367-4 Min. 0 0 0 50 50 50 50 Recropych test Admin w/Comp 97002 Reach Additional 20 Recropych Recruptor Recropych Recruptor Recropych R	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         \$0	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         \$0         <	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97110</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>-<del></del></td> <td></td> <td></td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td></td> <td>\$0</td> <td>0</td>	- <del></del>				Encounter	0	0	\$0		\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0	- <del></del>		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td>0</td>						0					0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td></td> <td>0</td>											0
Occupational Therapy         97755         Encounter         0         0         \$0         <								<u> </u>			0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0											0
											0
C/O for Orthotic/Prosth Use or Physical Therapy 97762 Encounter 0 0 \$0 \$0 \$0 \$0											0

Copper Country				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	1	1	\$90	\$90	\$90	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	12	26	\$8,859	\$738	\$341	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	8	19	\$10,131	\$1,266	\$533	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	2	9	\$7,164	\$3,582	\$796	5
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$136	\$136	\$136	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	1	10	\$709	\$709	\$71	10
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Copper Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Proposition	Copper Country				Unit	_		_			
Interportation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Exemperations	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Ministrate Charle Management   Ministrate Charles   Ministrate Charles Charl	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Middlessel Codes - Temperatatin	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Malfreid Cries - Temperation   Mal22   Excession   0   0   50   50   50   50   0   0   0	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Family Transing Stopport EMP only	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Encourer	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Endfordulal Assessment   H0001   Encounter   0   0   50   50   50   0	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounted   10002   Encounter   1   1   \$148   \$1	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abouse Laboratory	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Curpatient Treatment   1900, 1905, 1916, 1919   1910, 1915, 1916, 1919,	Assessment		H0002		Encounter	1	1	\$148	\$148	\$148	1
Container Aduse: Cute Management   Container   Container   Container Aduse: Cute Management   Container   Container Aduse: Cute Management   Container	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Dibblasse Abuse: Case Management   1000   1001   1001   1001   10001	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acuer Deteodification   1002   H0010   Encounter   0   0   50   50   50   0   0   50   50   50   0	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         S0         S0         S0         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         S0         S0         S0         0           Substance Abuse: Sub-Acute Detoxification         1002         H0015         Encounter         0         0         S0         S0         S0         0           Crisis Residential         10018         Encounter         0         0         S0         S0 <t< td=""><td>Substance Abuse: Case Management</td><td></td><td>H0006</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   10014   Encounter   0   0   50   50   50   50   0   0   50   50   50   0	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0906   H0015   Encounter   0   0   50   50   50   50   0   0   0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services         H0018         Encounter         0         0         S0         S0         S0         0           Substance Abuse: Residential         1002         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         50         0           Substance Abuse: Methadone         H0020         Encounter         0         0         50         50         50         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         50         50         50         50         0           Peer Directed and Operated Support Services         H0023         Encounter         0         0         50 <td>Substance Abuse: Sub-Acute Detoxification</td> <td>1002</td> <td>H0014</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   10018   Encounter   0   0   50   50   50   0   0   50   50   50   0	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   H0019   Encounter   0   0   S0   S0   S0   S0   S0   S0	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone   H0020   Encounter   0   0   S0   S0   S0   S0   0   S0	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services   H0023   Encounter   0   0   50   50   50   0	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         36         40         \$6,981         \$194         \$175         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$27,767         \$408         \$255         \$2         \$2         \$0	Assessment		H0031		Encounter	36	40	\$6,981	\$194	\$175	1
Treatment Planning         H0032         Encounter         68         109         \$27,767         \$408         \$255         2           Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	68	109	\$27,767	\$408	\$255	2
Health Services         H0034         Encounter         0         0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         Encounter         28         2,624         \$245,236         \$8,758         \$93         94           Home Based Services         H0036         \$T         Encounter         2         35         \$3,303         \$1,651         \$94         18           Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         2         35         \$3,303         \$1,651         \$94         18           Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	28	2,624	\$245,236	\$8,758	\$93	94
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	2	35	\$3,303	\$1,651	\$94	18
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 \$0	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Copper Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	51	609	\$53,206	\$1,043	\$87	12
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	2	137	\$25,666	\$12,833	\$187	69
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	4	152	\$16,724	\$4,181	\$110	38
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Position   Position	Copper Country	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Selection		Revenue code		Wodilici							-
Recipite											
Present Excess Response System (PERS)	- <del></del>										
								*			
Excinencial Modelination											
Debaced Medical Epigement Supplies											
Habil Services   S9445   15 Menters   0   0   50   50   50   50   10   10								·			
Meath Services   S9446								·			
Health Services   S9470   15 Minutes   0   0   50   50   50   0   0	Health Services				15 Minutes			<u> </u>			0
Presention Services - Direct Model   SH42											
Intensive Crisis Stabilization Exercised Program   S9484   15 Minutes   0   0   50   50   50   50   0	_ <del>-</del>				15 Minutes			·			
Residential Room and Board   S9976   Per diem   0   0   S0   S0   S0   S0   S0   S0	_ <del>-</del>										
Substance Abose Services: Residential Room and Board   S9976   Days   0   0   50   50   50   0	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes						0
Private Duty Nursing											
Private Duty Narising	Substance Abuse Services: Residential Room and Board				Days						0
Private Duty Narising	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Assessment   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care	Respite Care		T1005		Encounter	0	0	\$0	\$0	\$0	0
Respite Care (Chikhren's Waiver & SED Waiver)   T105   T1   15 Minutes   0   0   50   50   50   0	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services   T1009   15 minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         T1016         Per Diem         5         25         \$2,987         \$597         \$119         5           Targeted Case Management         T1017         Per Diem         0         0         \$50         \$50         \$0         0           Nursing Home Mental Health Monitoring         T1017         \$E         15 Minutes         0         0         \$50         \$50         \$0         0           Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$50         \$50         \$0         0         \$60 <td>Substance Abuse: Recovery Support Services</td> <td></td> <td>T1012</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         0         0         \$0	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>5</td><td>25</td><td>\$2,987</td><td>\$597</td><td>\$119</td><td>5</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	5	25	\$2,987	\$597	\$119	5
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Targeted Case Management		T1017		Per Diem	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         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         TG         Days         0         0         50         50         50         0           Assessments         T1023         15 Minutes         23         34         \$36,558         \$1,589         \$1,075         1           Prevention Services - Direct Model         T1027         Days         2         93         \$8,361         \$4,181         \$90         47           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         23         34         \$36,558         \$1,589         \$1,075         1           Prevention Services - Direct Model         T1027         Days         2         93         \$8,361         \$4,181         \$90         47           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         2         93         \$8,361         \$4,181         \$90         47           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>23</td> <td>34</td> <td>\$36,558</td> <td>\$1,589</td> <td>\$1,075</td> <td>1</td>	Assessments		T1023		15 Minutes	23	34	\$36,558	\$1,589	\$1,075	1
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	2	93	\$8,361	\$4,181	\$90	47
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation         T2002         15 Minutes         0         0         \$0	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation T2002 15 Minutes 0 0 \$0 \$0 \$0 0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Copper Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					132		\$672,210			

80100

80101

90785

## Children with Serious Emotional Disturbance

Civilish Cost Data by Scrvice Category			SUB-ELEMENT COST REPORT: Fiscal Year 2014				State of Whenigan			
Children with Serious Emotional Disturband	ce		S	UB-ELEMENT COST	REPORT: Fisca	l Year 2014				
Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	141	3,157	\$704,011	\$4,993	\$223	22
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	735	5,445	\$2,805,229	\$3,817	\$515	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			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-02	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	3	3	\$712	\$237	\$237	1
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	414	4,491	\$1,250,246	\$3,020	\$278	11
Outpatient Partial Hospitalization	0913		-	# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0

Minutes

Minutes

Per Screen

0

41

0

41

Drug Screen for Methadone Clients Only

Drug Screen for Methadone Clients Only

Interactive Complexity - Add On Code

0

\$25

\$0

\$83

\$0

\$83

\$25

\$0

\$3,383

Assessment for Autism  Assessment for Autism  Assessment for Autism  Assessment for Autism  Assessment for Autism	Levenue Code	90785 90791 90791	Modifier U5	Measure Per Screen	Cases 0	Units 0	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment Assessment for Autism Assessment		90791	U5	Per Screen	0	Λ				
Assessment for Autism Assessment						U	\$0	\$0	\$0	0
Assessment		90791			2,162	5,880	\$588,380	\$272	\$100	3
			U5		0	0	\$0	\$0	\$0	0
Assessment for Autism		90792		Encounter	2,646	2,928	\$832,082	\$314	\$284	1
		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	3,291	7,871	\$687,923	\$209	\$87	2
	00, 0906, 0914, 15, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	8	8	\$1,242	\$155	\$155	1
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	3,787	14,600	\$1,863,888	\$492	\$128	4
	00, 0906, 0914, 15, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	3	3	\$781	\$260	\$260	1
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	4,498	22,416	\$3,829,672	\$851	\$171	5
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	37	37	\$12,838	\$347	\$347	1
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	10	18	\$1,829	\$183	\$102	2
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	1	1	\$36	\$36	\$36	1
Therapy-Family Therapy		90846		Encounter 75-80 Min	1,518	9,078	\$980,094	\$646	\$108	6
	00, 0906, 0914, 15, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	4,825	18,551	\$2,419,520	\$501	\$130	4
	00, 0906, 0914, 15, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	77	198	\$8,027	\$104	\$41	3
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	65	321	\$12,009	\$185	\$37	5
	00, 0906, 0914, 15, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	1,307	10,687	\$612,120	\$468	\$57	8
	00, 0906, 0914, 15, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician 090	01	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	68	71	\$8,504	\$125	\$120	1
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	3	3	\$424	\$141	\$141	1
Speech & Language Therapy		92507		Encounter 75-80 Min	4	16	\$876	\$219	\$55	4
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Detroit-Wayne	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue code		Wiodifici							
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1,270	2,749	\$858,821	\$676	\$312	2
Assessment for Autism		96101	U5	Encounter 75-80 Min	8	33	\$4,732	\$591	\$143	4
Psychological Testing by Technician		96102		Encounter 75-80 Min	7	14	\$956	\$137	\$68	2
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	1,671	2,150	\$1,178,171	\$705	\$548	1
Assessments-Other		96111		45 Minutes	1	1	\$1	\$1	\$1	1
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	1	4	\$320	\$320	\$80	4
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	19	556	\$15,499	\$816	\$28	29
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	3	3	\$419	\$140	\$140	1
Occupational Therapy		97004		Encounter	1	1	\$145	\$145	\$145	1
Occupational or Physical Therapy		97110		Encounter	5	55	\$1,286	\$257	\$23	11
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	3	12	\$325	\$108	\$27	4
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Processing Services   Processing   Process	Detroit-Wayne				Unit						
Personal Publish Services   7990   Pets Horr   412   16.872   531.355   13.26   300   41	Service Category	Revenue Code HO	CPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Holik Services	Assessment or Health Services	Ģ	97802		Encounter	324	2,053	\$62,545	\$193	\$30	6
Pathware Abase: Augmenture	Assessment or Health Services	Ģ	7803		First Hour	412	16,832	\$513,335	\$1,246	\$30	41
Deletance Aber: Appendix Prec. Appendix Prec. Appendix Prec. Appendix Aber. Appendix Prec. Appendix Prec. Aber.   900   90   30   30   30   30   30   3	Health Services	9	97804			0	0	\$0	\$0	\$0	0
No. Places Foundation and Management   99,001   16   16   16   17   18   18   18   18   18   18   18	Substance Abuse: Acupuncture	Ģ	7810		Encounter	0	0	\$0	\$0	\$0	0
New Parlame Fordation and Management   95201   U5   Hour   2   2   \$2.24   \$1.12   \$	Substance Abuse: Acupuncture	Ģ	7811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99202	New Patient Evaluation and Management	Ģ	99201		Per Hour	2	2	\$94	\$47	\$47	1
Accounter for Autism	Assessment for Autism	Ģ	99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Pasient Fishalation and Management   99001	New Patient Evaluation and Management	Ģ	99202		Per Hour	2	2	\$224	\$112	\$112	1
Assessment for Autisian   September   Se	Assessment for Autism	Ģ	99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Armer: New Pairent Evaluation and Management   99.01   Excounter   0   0   50   50   50   0	New Patient Evaluation and Management	Ģ	99203		Per Hour	14	17	\$1,980	\$141	\$116	1
New Patient Evaluation and Management   99204   Encounter   2   2   2   2277   5139   5139   1	Assessment for Autism	Ģ	99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management	Ģ	9203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Parkient Evaluation and Management   99204   Per Hour   0   0   50   50   50   0	New Patient Evaluation and Management	Ģ	99204		Encounter	2	2	\$277	\$139	\$139	1
New Parient Evaluation and Management   99205   Hour   20   20   \$3,700   \$185   \$185   1	Assessment for Autism	Ģ	99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U.5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management	Ģ	9204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abase: New Patient Evaluation and Management   99205	New Patient Evaluation and Management	Ģ	9205		Hour	20	20	\$3,700	\$185	\$185	1
Per Hour	Assessment for Autism	Ģ	9205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Passessment for Autism   Page   Pache   Pach	Substance Abuse: New Patient Evaluation and Management	Ģ	9205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   739   2,040   \$151,312   \$205   \$74   3     Assessment for Autism   99212   U5   Encounter   0   0   \$50   \$50   \$50   0     Assessment for Autism   99213   Encounter   3,770   12,705   \$1,714,79   \$470   \$139   3     Assessment for Autism   99213   U5   Encounter   0   0   0   50   \$50   \$50   \$0     Established Patient Evaluation and Management   99214   U5   Encounter   0   0   0   \$50   \$50   \$50   \$0     Assessment for Autism   99214   U5   15 Minutes   821   1,625   \$302,731   \$369   \$186   22     Assessment for Autism   99214   U5   15 Minutes   20   31   \$7,510   \$375   \$242     Assessment for Autism   99215   U5   15 Minutes   20   31   \$7,510   \$375   \$242     Assessment for Autism   99215   U5   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99212   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99224   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99226   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   99226   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   50   50   50     Additional Codes-Physician Services   9923   15 Minutes   0   0   50   5	Established Patient Evaluation and Management	Ģ	99211		Per Hour	383	1,202	\$64,683	\$169	\$54	3
Assessment for Autism   99212   U5   Encounter   0   0   50   50   50   0   0	Assessment for Autism	Ģ	99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0   0   0	Established Patient Evaluation and Management	Ģ	99212		Encounter	739	2,040	\$151,312	\$205	\$74	3
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism	Ģ	99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214	Established Patient Evaluation and Management	Ģ	99213		Encounter	3,770	12,705	\$1,771,479	\$470	\$139	3
Assessment for Autism         99214         U5         15 Minutes         0         0         S0         S0         S0         0           Established Patient Evaluation and Management         99215         15 Minutes         20         31         \$7,510         \$375         \$242         2           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism	Ģ	99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         20         31         \$7,510         \$375         \$242         2           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management	ģ	99214		15 Minutes	821	1,625	\$302,731	\$369	\$186	2
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism	Ģ	99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99226         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99233         15 Minutes	Established Patient Evaluation and Management	Ģ	99215		15 Minutes	20	31	\$7,510	\$375	\$242	2
Additional Codes-Physician Services         99222         15 Minutes         0         0         \$	Assessment for Autism	Ģ	99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services	Ģ	99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services	Ģ	9222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services	9	99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services	Ģ	99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         \$	Additional Codes-Physician Services	Ģ	99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services	9	99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services	9	99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td>9</td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services	9	99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Additional Codes-Physician Services	9	99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment	9	99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism	9	99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment	9	99325		15 Minutes	0	0	\$0	\$0	\$0	0

Nameword   Note   Not	Detroit-Wayne				Unit						
Associated   9750   1.5 miles   0   0   30   30   9   9   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment fix Assistant 90226 US IS Maneres 0 0 0 90 90 90 90 90 00 Assessment fix Assistant 90227 US 30 Memers 0 0 0 90 90 90 90 90 00 Assessment fix Assistant 90238 US Encounter 0 0 0 90 90 90 90 90 90 00 Assessment fix Assistant 90238 US Encounter 0 0 0 90 90 90 90 90 90 90 90 90 90 90 9	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment   9027   15 Maneres   0   0   50   50   50   0   0   0   0	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Monement for Autism	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Sectiones   99238   Encourser   0   0   50   50   50   50   50   0	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment   99.134	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audism	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authors 99336  Assessment 99336  Excounter 0 0 0 30 30 30 30 0 0 Assessment 99337  Excounter 0 0 0 30 30 30 30 0 0 Assessment 99337  Excounter 0 0 0 50 50 50 50 0 0 Assessment Portation 99337  US Excounter 0 0 0 50 50 50 50 0 0 Assessment Assessment Portation 99331  US Excounter 0 0 0 50 50 50 50 0 0 Assessment Assessment Portation 99341  US Excounter 0 0 0 50 50 50 50 0 0 Assessment Assessment Portation 99341  US Excounter 0 0 0 50 50 50 50 0 0 Assessment Portation 99341  US Excounter 0 0 0 50 50 50 50 0 0 Assessment Portation 99342  Excounter 0 0 0 50 50 50 0 0 Assessment Portation 99343  Excounter 0 0 0 50 50 50 0 Assessment Portation Porta	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn 98326	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autrism 99336 U5 Frecounter 0 0 0 80 80 80 50 0 0 Assessment for Autrism 99337 T Frecounter 0 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99341 E Excounter 0 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99341 U5 Excounter 0 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99342 Excounter 0 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99342 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99342 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99342 U5 Frecounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99343 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99343 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99343 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99344 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99345 U5 Excounter 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 80 0 0 Assessment for Autrism 99340 U5 80 Minutes 0 0 0 80 80 80 80 80 80 80 80 80 80 80	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99337 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 50 0 Assessment for Autism 99350 U5 Palouters 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99377 US Encounter 0 0 0 30 30 50 50 0 Assessment for Aurism 99341 US Encounter 0 0 0 50 50 50 0 Assessment for Aurism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 US To Minutes 0 0 0 50 50 50 50 0 To Minutes 0 0 0 50 50 50 50 0 To Minutes 0 0 0 50 50 50 50 0 To Minutes 0 0 0 50 50 50 50 0 To Minutes 0 0 0 50	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Antism	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 1 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 1 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 1 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Solvanter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Solvanter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Solvanter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 Solvanter 0 0 0 50 50 50 50 0 Assessment for Autism 0 99350 U5 Solvanter 0 0 0 50 50 50 50 0 Assessment for Autism 0 99350 U5 Solvanter 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 U5 Solvanter 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 U5 Solvanter 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 U5 Solvanter 0 0 0 50 50 50 50 50 0  Transportation 0 A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 50 50 50 50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Excounter 0 0 50 50 50 50 50 0 0 Assessment of Autism 99343 U5 Excounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Excounter 0 0 0 50 50 50 50 50 0 Assessment of Autism 99344 U5 Excounter 0 0 0 50 50 50 50 50 50 50 50 Assessment for Autism 99344 U5 Excounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 0 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   50   50   50   0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   50   50   50   50   0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   U5   Encounter   0   0   50   50   50   0   0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         SO         50 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Medication Management         99506         15 Minu	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         50         50         60         Assessment         Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0         0         Assessment         99350         U5         70 Minutes         0         0         50 <td>Assessment for Autism</td> <td></td> <td>99347</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Part	Detroit-Wayne				Unit						
Intersepteration	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Description	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Meditional Codes - Transportation	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Millander Class-Presportation   M-427   Encounter   0   0   30   50   50   50   50   50	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
	Additional Codes-Transportation		A0425		Encounter	20	557	\$2,642	\$132	\$5	28
	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Sipport Services   10001   1000000000000000000000000000	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Debatame Abuse: Infinitial Assessment   10001   Faccounter   0   0   0   50   50   50   0   0   0	Family Training/Support EBP only		G0177		Encounter	2	2	\$206	\$103	\$103	1
Accounter	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abase Calopations	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Curpatient Treatment	Assessment		H0002		Encounter	4,079	13,680	\$785,950	\$193	\$57	3
Designation Above: Cure Management   H000   Eacouster   Designation Treatment   Designation Treatment   Designation Treatment   Designation Above: Cure Management   H000   Eacouster   Designation   Designation	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Designation	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   H0012   Encounter   0   0   0   50   50   50   0   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   140012   160014   1600	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   10014   Encounter   0   0   50   50   50   50   0   5	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Cutparient Care   0906   H0015   Encounter   0   0   S0   S0   S0   S0   S0   S0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services   H0018   Encounter   190   1,561   S593,578   S3,124   S380   8   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   50   0   Substance Abuse: Early Intervention   H0022   Encounter   0   0   50   50   50   50   0   Substance Abuse: Early Intervention   H0023   Encounter   0   0   50   50   50   50   0   Pere Directed and Operated Support Services   H0023   Encounter   2   2   2   2   244   5122   5122   1   Crisis Intervention   H0030   Encounter   0   0   50   50   50   50   0   Assessment   H0031   Encounter   9,247   23,306   43,49,999   4370   5187   33   Assessment for Autism   H0031   HW   Encounter   1   1   2   3,439   5287   5287   1   Teatment Planning   H0032   Encounter   0   0   0   50   50   50   50   Teatment Planning   H0032   Encounter   0   0   50   53   53,127,551   5382   5157   2   Monitoring of Treatment - Clinician   H0032   TS   Encounter   0   0   50   53,127,551   5382   5157   2   Monitoring of Treatment - Clinician   H0034   Encounter   0   0   0   50   50   50   50   Hone Based Services   H0036   Encounter   1   1   1   5102   5102   5102   5102   5102   5104   Hone Based Services   H0036   TE   Encounter   1,999   240,575   515,599,15   57,804   565   120   Hone Based Services   H0036   TE   Encounter   1,999   240,575   515,599,15   57,804   565   120   Hone Based Services   H0036   TE   Encounter   1,199   240,575   515,599,15   57,804   565   120   Hone Based Services   H0036   TE   Encounter   1,199   240,575   515,599,15   57,804   565   120   Hone Based Services   H0036   TE   Encounter   1,199   240,575   515,599,15   57,804   565   120   Hone Based Services   H0038   TE   Encounter   1,199   240,575   515,699,15   57,804   565   120   Hone Based Services   H0038   TE   Encounter   1,199   240,575   515,699,15   57,804   565   120   Hone Based Service	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   1000	Crisis Residential Services		H0018		Encounter	190	1,561	\$593,578	\$3,124	\$380	8
Substance Abuse: Methadone   H0020   Encounter   0 0 0   S0   S0   S0   S0   O	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention   H0022   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model   H0025   Encounter   2   2   \$244   \$122   \$12   \$1   \$1   \$1   \$2   \$1   \$1	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$187         \$3           Assessment for Autism         H0031         U5         Encounter         12         12         \$3,439         \$287         \$287         1           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0<	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         9,247         23,306         \$4,349,939         \$470         \$187         3           Assessment for Autism         H0031         U5         Encounter         12         12         \$3,439         \$287         \$287         1           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	2	2	\$244	\$122	\$122	1
Assessment for Autism         H0031         U5         Encounter         12         12         12         \$3,439         \$287         \$287         1           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Treatment Planning         H0032         Encounter         8,187         19,881         \$3,127,551         \$382         \$157         2           Monitoring of Treatment - Clinician         H0032         TS         Encounter         960         1,480         \$316,204         \$329         \$214         2           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Assessment		H0031		Encounter	9,247	23,306	\$4,349,939	\$470	\$187	3
Treatment Planning         H0032         Encounter         8,187         19,881         \$3,127,551         \$382         \$157         2           Monitoring of Treatment - Clinician         H0032         TS         Encounter         960         1,480         \$316,204         \$329         \$214         2           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Assessment for Autism		H0031	U5	Encounter	12	12	\$3,439	\$287	\$287	1
Monitoring of Treatment - Clinician         H0032         TS         Encounter         960         1,480         \$316,204         \$329         \$214         2           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	8,187	19,881	\$3,127,551	\$382	\$157	2
Health Services         H0034         Encounter         1         1         \$102         \$102         \$102         \$102         \$1           Home Based Services         H0036         Encounter         1,999         240,575         \$15,599,915         \$7,804         \$65         120           Home Based Services         H0036         ST         Encounter         4         126         \$7,190         \$1,798         \$57         32           Peer Directed and Operated Support Services         H0038         Encounter         171         235         \$1,616         \$9         \$7         1           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	960	1,480	\$316,204	\$329	\$214	2
Home Based Services         H0036         Encounter         1,999         240,575         \$15,599,915         \$7,804         \$65         120           Home Based Services         H0036         ST         Encounter         4         126         \$7,190         \$1,798         \$57         32           Peer Directed and Operated Support Services         H0038         Encounter         171         235         \$1,616         \$9         \$7         1           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         4         126         \$7,190         \$1,798         \$57         32           Peer Directed and Operated Support Services         H0038         Encounter         171         235         \$1,616         \$9         \$7         1           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Health Services		H0034		Encounter	1	1	\$102	\$102	\$102	1
Peer Directed and Operated Support Services         H0038         Encounter         171         235         \$1,616         \$9         \$7         1           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	1,999	240,575	\$15,599,915	\$7,804	\$65	120
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	4	126	\$7,190	\$1,798	\$57	32
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	171	235	\$1,616	\$9	\$7	1
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# irbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	68	625	\$124,144	\$1,826	\$199	9
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	149	712	\$81,163	\$545	\$114	5
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	1,437	12,192	\$548,092	\$381	\$45	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	22	1,442	\$24,108	\$1,096	\$17	66
Community Living Supports (15 Minutes)		H2015		Encounter	11	14,854	\$53,428	\$4,857	\$4	1,350
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	2	124	\$20,936	\$10,468	\$169	62
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	525	53,355	\$5,278,033	\$10,053	\$99	102
Wraparound (SED Waiver)		H2022		Per one-way trip	24	1,314	\$128,772	\$5,366	\$98	55
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	16	1,662	\$134,967	\$8,435	\$81	104
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	311	738	\$48,592	\$156	\$66	2
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
		33110								
Family Training		S5111		Days	66	232	\$20,260	\$307	\$87	4
Family Training Family Training			НА	Days Days	66 5	232 9	\$20,260 \$921	\$307 \$184	\$87 \$102	4 2

Professor   Prof	<b>Detroit-Wayne</b>				Unit						
Patter   Care	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Section	Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Personal Energy Depunse System PERS   \$5.51   Energy Depunse System PERS   \$5.50   Energy Depart System PERS   \$5.50   Energy Depart System PERS   \$5.50   En	Foster Care		S5145		Days	1	37	\$11,454	\$11,454	\$310	37
Personal Energency Response System (PUIS)	Respite		S5150		Days	0	0	\$0	\$0	\$0	0
	Respite		S5151		Encounter	0	0	\$0	\$0	\$0	0
Part	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Debaced Markes Liquipment Supples	Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
	Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Facility Number   Sayle   Sa	Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Meath Services   S9446	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   S9470	Health Services		S9445		15 Minutes	351	846	\$67,679	\$193	\$80	2
Prevention Services - Direct Model   S9482	Health Services		S9446		15 minutes	3	3	\$81	\$27	\$27	1
Intensive Crisis Stabilization-Hurolited Program	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976   Per diem   0   0   50   50   50   50   0	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Above Services: Residential Room and Board   S9976   Days   O   O   S0   S0   S0   S0   O	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	127	252	\$87,550	\$689	\$347	2
Private Daty Nursing	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Duty Narising   T1000   TD   Per Diem   0   0   50   50   50   50   0   0	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Narising	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Assessment   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	909	946	\$120,912	\$133	\$128	1
Respite Care	Health Services		T1002		15 Minutes	293	528	\$37,495	\$128	\$71	2
Respite Care   Ti005   TE   15 minutes   0   0   S0   S0   S0   S0   0	Respite Care		T1005		Encounter	13	6,599	\$46,357	\$3,566	\$7	508
Respite Care (Children's Waiver & SED Waiver)   T105   TT   15 Minutes   0   0   50   50   50   0	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services   T1009   15 minutes   0   0   50   50   50   0	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         80         80         9           Family Psycho-Education - EBP         T1015         Per Diem         1         1         \$113	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         Tiol6         Per Diem         7         29         \$5,007         \$715         \$173         4           Targeted Case Management         Tiol7         Per Diem         4,669         115,389         \$7,839,303         \$1,679         \$68         25           Nursing Home Mental Health Monitoring         Tiol7         \$E         15 Minutes         0         0         \$0         <	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         4,669         115,389         \$7,839,303         \$1,679         \$68         25           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         50         \$0         0           Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0 <td>Family Psycho-Education - EBP</td> <td></td> <td>T1015</td> <td></td> <td>Per Diem</td> <td>1</td> <td>1</td> <td>\$113</td> <td>\$113</td> <td>\$113</td> <td>1</td>	Family Psycho-Education - EBP		T1015		Per Diem	1	1	\$113	\$113	\$113	1
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>7</td><td>29</td><td>\$5,007</td><td>\$715</td><td>\$173</td><td>4</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	7	29	\$5,007	\$715	\$173	4
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>4,669</td><td>115,389</td><td>\$7,839,303</td><td>\$1,679</td><td>\$68</td><td>25</td></th<>	Targeted Case Management		T1017		Per Diem	4,669	115,389	\$7,839,303	\$1,679	\$68	25
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$15         \$15	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         2         124         \$19,287         \$9,643         \$156         62           Assessments         T1023         15 Minutes         4         4         \$842         \$210         \$210         1           Prevention Services - Direct Model         T1027         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         4         4         8842         \$210         \$210         1           Prevention Services - Direct Model         T1027         Days         0         0         \$0 <td>Personal Care in Licensed Specialized Residential Setting</td> <td></td> <td>T1020</td> <td>TF</td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$34         \$136         \$3           Enhanced Medical Supplies or Pharmacy         T1999         Days         30         76         \$10,335         \$344         \$136         3           Transportation         T2001         15 minutes         0         0         \$0 <t< td=""><td>Personal Care in Licensed Specialized Residential Setting</td><td></td><td>T1020</td><td>TG</td><td>Days</td><td>2</td><td>124</td><td>\$19,287</td><td>\$9,643</td><td>\$156</td><td>62</td></t<>	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2	124	\$19,287	\$9,643	\$156	62
Enhanced Medical Supplies or Pharmacy         T1999         Days         30         76         \$10,335         \$34         \$136         3           Transportation         T2001         15 minutes         0         0         \$0	Assessments		T1023		15 Minutes	4	4	\$842	\$210	\$210	1
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy		T1999		Days	30	76	\$10,335	\$344	\$136	3
Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0         0	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation T2002 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	22	26	\$3,346	\$152	\$129	1
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0

Encounter

Month

SUB-ELEMENT COST REPORT: Fiscal Year 2014

0

0

0

0

\$0

\$0

\$0

\$0

\$0

\$0

\$0

0

0

0

 Aggregate for J'Codes
 ALL
 Service
 0
 0
 \$0

 Total Population and Cost
 13,604
 \$61,347,180

Pharmacy (Drugs and Other Biologicals)

Other

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	15	351	\$260,974	\$17,398	\$744	23
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	190	1,524	\$1,029,037	\$5,416	\$675	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	63	532	\$333,968	\$5,301	\$628	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	1			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	161	1,682	\$533,547	\$3,314	\$317	10
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	288	1,369	\$16,318	\$57	\$12	5

Newsord News	Genesee				Unit						
Assenceme   9079	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mesement for Austrian	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Securior   9077   Securior   306   307   \$153   \$107   \$1   \$1   \$1   \$2   \$2   \$2   \$3   \$2   \$3   \$3   \$3	Assessment		90791			107	112	\$57,497	\$537	\$513	1
	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Secret Health Corpolater Care	Assessment		90792		Encounter	236	247	\$75,763	\$321	\$307	1
Subsect above: Opposited Care   0903, (1906, 1908)   1	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   9833	Mental Health: Outpatient Care		90832		Encounter	167	317	\$28,353	\$170	\$89	2
December for Authorn   90851   US   Encounter   331   1815   567,477   5204   588   32	Substance abuse: Outpatient Care		90832		Encounter	1	1	\$47	\$47	\$47	1
Moreal Health Congastent Cure	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance obser: Outputient Care   6903, 6904, 6915, 6916, 6019   Facounter 23,30 Min   0   0   50   50   50   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Merial Health Cappning Care   9836   Eacounter 20-30 Min   0   0   0   50   50   50   0   0   50	Mental Health: Outpatient Care		90834		Encounter	331	815	\$67,477	\$204	\$83	2
Assessment for Authinn   S9836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	7	7	\$593	\$85	\$85	1
Mental Health: Outputient Care   90837   Encounter 20-30 Min   526   2,474   \$305,530   \$581   \$123   5	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care   90837   Encounter 20:30 Min   11   11   \$1,411   \$128   \$128   1	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   South	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	526	2,474	\$305,530	\$581	\$123	5
Assessment for Autism 90838 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	11	11	\$1,411	\$128	\$128	1
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   69   220   \$26.432   \$383   \$120   3	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90846         Encounter 75-80 Min         2         2         \$148         \$74         \$74         1           Therapy-Family Therapy         90847         Encounter 75-80 Min         80         167         \$25,022         \$313         \$150         2           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 20-30 Min         0         0         \$50         \$50         \$170	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90847   Encounter 75-80 Min   80   167   \$25.022   \$313   \$150   2   \$150	Therapy-Family Therapy		90846		Encounter 75-80 Min	69	220	\$26,432	\$383	\$120	3
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915   09049   Encounter 75-80 Min   1   1   \$170   \$170   \$170   \$170   1	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	2	2	\$148	\$74	\$74	1
Paramy-Family Therapy   90849   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90847		Encounter 75-80 Min	80	167	\$25,022	\$313	\$150	2
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	1	1	\$170	\$170	\$170	1
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   80   80   80   80   80   80	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   9087   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	49	186	\$13,195	\$269	\$71	4
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
			92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Process   Proc	Genesee				Unit						
Speech A. Language Therapy	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special European Theory	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Second A Leaguery Decays	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCLEPTYS   9019	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Aurilian	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Toning by Technicins   96/02   Paceumor 75/90 Mines   0   0   39   30   10   0	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	1	\$1,091	\$1,091	\$1,091	1
Assertance for Authors   95002	Assessment for Autism		96101	U5	Encounter 75-80 Min	37	252	\$103,270	\$2,791	\$410	7
Psychological Testing by Comp	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Minutes 0 0 5 5 5 5 5 0 0 0 Assessment-Other 9610 30 Minutes 0 0 0 5 5 5 5 5 0 0 0 0 Assessment-Other 9611 4 Minutes 0 0 0 5 5 5 5 5 0 0 0 0 0 0 5 5 5 5 0	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assuments-Other 96110 30 Minutes 0 0 5 50 50 50 50 0 0 Assuments-Other 96111 4.5 Minutes 0 0 0 5 50 30 30 30 0 0 0 Neuropolyte for by PsychPlys 96118 4.5 Minutes 0 0 0 5 50 30 50 50 0 0 Neuropolyte for by PsychPlys 96118 4.5 Minutes 0 0 0 5 50 50 50 50 50 0 0 Neuropolyte for by PsychPlys 96118 4.5 Minutes 0 0 0 5 50 50 50 50 50 50 0 0 Neuropolyte for by PsychPlys 96118 4.5 Minutes 0 0 0 5 50 50 50 50 50 50 0 0 Neuropolyte for by PsychPlys 96118 4.5 Minutes 0 0 0 5 50 50 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Tech 97110 U.5 6 Minutes 0 0 0 5 50 50 50 0 0 Neuropolyte for by Neuropol	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropechavisarial Status Exam	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych tead by Psych Pfrys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism   96118   U5	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
New Seasement for Autism   96119   U5   60 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0   0   0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   80   80   80   80   90	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Name	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Cocupational Therapy   97044   Encounter   0   0   S0   S0   S0   S0   S0   O	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97113         Encounter         0         0         SO	Occupational Therapy		97003		Encounter	5	6	\$1,447	\$289	\$241	1
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO <t< td=""><td>Occupational or Physical Therapy</td><td></td><td>97110</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97124         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97150         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97530         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97532         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97533         Encounter         0         0         S0	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	1	1	\$65	\$65	\$65	1
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	2	2	\$164	\$82	\$82	1
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	1	4	\$2,247	\$2,247	\$562	4
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	111	146	\$6,892	\$62	\$47	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	517	1,606	\$210,571	\$407	\$131	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	534	1,652	\$229,904	\$431	\$139	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	76	99	\$38,599	\$508	\$390	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	47	52	\$3,029	\$64	\$58	1
Additional Codes-Physician Services		99223		Encounter	1	1	\$92	\$92	\$92	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	8	25	\$468	\$58	\$19	3
Additional Codes-Physician Services		99232		15 Minutes	48	274	\$8,318	\$173	\$30	6
Additional Codes-Physician Services		99233		15 Minutes	15	36	\$1,689	\$113	\$47	2
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Service Lingsory         Formation (Principle)         Post (Principle)         Control (Principle)	Genesee		venas a l	26.119	Unit				aa		***
Assertance   99256   15 minutes   0   0   93   30   92   0   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Parkins   9032   13 Minutes   0   0   50   50   50   50   0   0   0	Assessment for Autism		99325	U5	15 Minutes		0				0
Assessment   9737	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Auton	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autom	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Ascessment for Authins	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   99315   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authin	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authan   93156   U5   Faccounter   0   0   50   50   50   0   0   Assessment for Authan   93337   Excounter   0   0   50   50   50   0   0   0   0	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn 99337 US Facounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99341 Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99341 US Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99342 Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99343 Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99344 Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99345 US Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99344 Eacounter 0 0 0 50 50 50 50 50 0 Assessment for Authorn 99344 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99344 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99344 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99344 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99344 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99345 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99347 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99347 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99347 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99348 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99349 US Eacounter 0 0 0 50 50 50 50 0 Assessment for Authorn 99340 Factorial for Authorn 99340 Factor	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99337 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99341 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99349 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99349 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Bincounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Bincounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 U5 Bincounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 50 0 Transportation A0000 Encounter 0 0 0 50 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 US Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99341 US Encounter 0 0 0 50 50 50 50 0 0 0 50 50 50 0 0 0 50 5	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99343 Encounter 0 0 0 0 50 50 50 50 0 0 0 0 50 50 50 0 0 0 0 50 5	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 93342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9347 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9349 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 Assessment for Autism 9350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 Medication Administration 9350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 Medication Administration 9350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 Medication Management 94060 U5 Minutes 0 0 0 50 50 50 50 0 0 Transportation A0000 Encounter 0 0 0 50 50 50 50 50 0 0 Transportation A0000 Encounter 0 0 0 50 50 50 50 50 0 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99343 U5 Encounter 0 0 5 50 50 50 0 0 Assessment ( 99344 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99347 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99348 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99349 Encounter 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 99349 U5 50 Minutes 0 0 0 50 50 50 50 0 Assessment ( 9	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Medication Management         99506         15 Minu	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         50         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	1	42	\$195	\$195	\$5	42
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	5	6	\$997	\$199	\$166	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	591	648	\$153,167	\$259	\$236	1
Assessment for Autism		H0031	U5	Encounter	11	65	\$27,041	\$2,458	\$416	6
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	33	42	\$8,872	\$269	\$211	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	12	45	\$12,551	\$1,046	\$279	4
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	212	35,550	\$2,206,218	\$10,407	\$62	168
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	24	100	\$9,414	\$392	\$94	4
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Series   S	Genesee				Unit						
Sementify Lings Supports in Microgram Formers   1908   Excountry   0   0   0   59   59   50   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Process	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Peach Baser Alborated Suppose Services	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Sebation   1998	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Patrice   Patr	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pachavir Prominent Pan Review   12000   Resounter   1   0   0   0   0   0   0   0   0   0	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehaver Notember Plus Review - Monitering Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Description Modification Services - EBP only	Behavior Treatment Plan Review		H2000		Encounter	1	2	\$0	\$0	\$0	2
Cicki Interwation	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Sali-Binding and Out of Home Non-Vocational Habibilation   112014   Encounter   0   0   0   50   50   50   50   60	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	61	299	\$222,937	\$3,655	\$746	5
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	17	16,355	\$67,238	\$3,955	\$4	962
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).         H2019         U.5         Per one-way trip         18         7.357         \$717,938         \$59,885         \$98         409           Early Intensive Behavioral Intervention (EBID)         H2019         U.5, TG         Per one-way trip         0         0         50         50         50         0           Cisis Intervention         H2020         Per one-way trip         34         1,846         \$347,055         \$50,077         \$188         54           Wraparound (SED Waiver)         H2021         Per one-way trip         2         564         \$166,548         \$4,861         \$190         26           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         50         50         50         26           Wapported Employment Services         H2023         Per one-way trip         0         0         50         <	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Party Intensive Behavioral Intervention (EIBI)	Behavior Services		H2019		Per mile	28	2,469	\$146,507	\$5,232	\$59	88
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	18	7,357	\$717,938	\$39,885	\$98	409
Marganound   Mar	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maria	Wraparound		H2021		Per one-way trip	34	1,846	\$347,055	\$10,207	\$188	54
Supported Employment Services   H2023   Per one-way trip   0   0   S0   S0   S0   S0   D0	Wraparound (SED Waiver)		H2022		Per one-way trip	22	564	\$106,948	\$4,861	\$190	26
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care         0900, 0914, 0915, 0919         H2027         Per Mile         0         0         S0         S0         S0         0           Clubhouse Psychosocial Rehabilitation Programs         H2030         Refer to code descriptions.         0         0         \$0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least op15, 0916, 0919   H2036   H2036	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915   18206   1820   18	Home Based Services		H2033		Items	43	2,994	\$360,955	\$8,394	\$121	70
Medication Review         M0064         Encounter         38         40         \$1,864         \$49         \$47         1           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	38	40	\$1,864	\$49	\$47	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,049         \$31         34           Family Training - EBP         \$5110         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>S0209</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         \$5108         U5         Encounter         10         340         \$10,487         \$1,049         \$31         34           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$139         \$3         \$3         \$3         \$475         \$139         \$3         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         60         205         \$28,517         \$475         \$139         3           Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0         0         0         \$0         \$0         \$0         \$0         0         0         \$0 <td>Home Care Training to Home Care Client</td> <td></td> <td>S5108</td> <td>U5</td> <td>Encounter</td> <td>10</td> <td>340</td> <td>\$10,487</td> <td>\$1,049</td> <td>\$31</td> <td>34</td>	Home Care Training to Home Care Client		S5108	U5	Encounter	10	340	\$10,487	\$1,049	\$31	34
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	60	205	\$28,517	\$475	\$139	3
Family Training         S5111         HM         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	HM	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	1	1	\$274	\$274	\$274	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	118	1,171	\$202,858	\$1,719	\$173	10
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	24	24	\$1,717	\$72	\$72	1
Health Services		T1002		15 Minutes	183	401	\$22,985	\$126	\$57	2
Respite Care		T1005		Encounter	389	262,521	\$1,056,222	\$2,715	\$4	675
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	701	8,388	\$453,934	\$648	\$54	12
Targeted Case Management		T1017		Per Diem	822	34,084	\$1,847,418	\$2,247	\$54	41
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	10	11	\$3,023	\$302	\$275	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					1,742		\$11,400,662			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Gogebic				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	2	\$1,439	\$1,439	\$720	2
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			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Name	Gogebic				Unit						
Descriment   1971   15   10   0   0   50   30   50   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Justimes   90791   US	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Month Math. Chaptein Circ   9070;   Encounter   7   7   98,95   \$1,04   \$1,04   \$1,04   \$1,00   \$1,0	Assessment		90791			0	0	\$0	\$0	\$0	0
Montal Metals Computers Care   9090;   905   900   9	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	7	7	\$9,829	\$1,404	\$1,404	1
Substance abuse: Computers Care   1900,	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mariement   Military	Mental Health: Outpatient Care		90832		Encounter	1	1	\$221	\$221	\$221	1
Secondary for Antim	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mental Health Charpatient Care   98034   Bacounter   2   5   \$1,685   \$841   \$337   3	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Obsparison Care   0900, 0904, 0914, 0915, 0916, 0919   98334   Encounter 25-30 Min   0   0   50   50   50   50   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mean Health Coluptation Curv	Mental Health: Outpatient Care		90834		Encounter	2	5	\$1,683	\$841	\$337	3
Assessment for Aurism 90836 U5 Excounter 25-30 Min 0 0 0 50 50 50 50 0 0 Menual Ideality Cutriquitient Care 90837 Excounter 25-30 Min 2 7 53,148 51,574 5450 4  Excounter 25-30 Min 0 0 0 50 50 50 50 50 0  Assessment 90838 Excounter 45-50 Min 0 0 0 50 50 50 50 50 0  Assessment for Aurism 90838 U5 Excounter 45-50 Min 0 0 0 50 50 50 50 0  Psychotherapy for Criss First 60 Minutes 90839 Excounter 45-50 Min 0 0 0 50 50 50 50 0  Psychotherapy for Criss First 60 Minutes 90840 Excounter 45-50 Min 0 0 0 50 50 50 50 50 0  Psychotherapy for Criss First 60 Minutes 90840 Excounter 45-50 Min 0 0 0 50 50 50 50 50 0  Psychotherapy for Criss First 60 Minutes 90840 Excounter 45-50 Min 0 0 0 50 50 50 50 50 0  Psychotherapy for Criss First 60 Minutes 90840 Excounter 45-50 Min 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Curpatient Care   90877   Excounter 20-30 Mm   2   7   \$3,148   \$1,574   \$450   4	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance about: Comparison Care   90837   Encounter 25-30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Spots	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	2	7	\$3,148	\$1,574	\$450	4
Assessment for Autism 96888 U5 Encounter 45-50 Min 0 0 S0 S0 S0 S0 0 0 Psychotherapy for Crisis Fast 60 Minutes 96839 Encounter 45-50 Min 0 0 0 S0 S0 S0 S0 0 0 Therapy-Family Therapy 97 Crisis Each Additional 30 Minutes 96840 Encounter 75-80 Min 0 0 S0 S0 S0 S0 S0 S0 Therapy-Family Therapy 98466 Encounter 75-80 Min 1 4 S970 S970 S242 4 Substance Abuse: Outpairent Treatment 990,0 6906, 6914, 9015, 6916, 6919 Particular Particular (Politics of 16, 6919 Particular Particu	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   1   2   \$130   \$130   \$65   2	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy   90847   Encounter 75-80 Min   1   2   \$130   \$130   \$65   2	Therapy-Family Therapy		90846		Encounter 75-80 Min	1	4	\$970	\$970	\$242	4
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90847   Encounter 20-30 Min   0   0   S0   S0   S0   S0   0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	1	2	\$130	\$130	\$65	2
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   90870   Encounter 45-50 Min   0   0   0   50   50   50   50   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Part	Gogebic				Unit						
Special Funguer Energy   93224   Enouser 45-30 Man   0   0   53   30   50   0   0   50   5	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Enganger Theory   92256   Resoulter 7540 Main   0   0   50   50   50   0   0	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Systematics   Texture   SYSCHEPTYS    94011   Becometer 45-59 Miles   0   0   93   90   90   0   0   0   90   9	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Authors	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technistian   96102   U5 Normanian   0	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Austina	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Tening by Comp   96113   90 Minates   0   0   90   50   50   90   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 96116 30 Minutes 0 0 9 90 80 80 50 0 0 Assessment-Other 96110 30 Minutes 0 0 0 90 80 80 50 00 0 Assessment-Other 96111 4-5 Minutes 0 0 0 90 80 80 80 80 00 0 Send-other-Authority Stutier Exam 96116 4-5 Minutes 0 0 0 90 80 80 80 80 80 80 80 80 80 80 80 80 80	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other 96110 30 Minutes 0 0 50 50 50 50 50 0 0 Assessments-Other 96111 44 Minutes 0 0 0 50 50 50 50 0 0 Assessments-Other 96111 44 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 9616 44 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 9618 45 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 9618 US 44 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96119 US 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96119 US 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96119 US 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 0 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 50 50 50 50 50 0 0 Noticepolar Administration 96120 60 50 50 50 50 50 50 50 50 50 50 50 50 50	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Accessment Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neumopochtes is by PsychPhys   Sel 18	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teat by PsychPhys   96118	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autisin  Assess	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropych test by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authsin 96119 U5 60 Minutes 0 0 50 50 50 50 00 Neurospych feet Admin wCropp 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 0 0 50 50 50 5	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin wComp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         80         50         80         0           Physical Therapy         97002         Esh Additional 30 Minutes         0         0         80         50         80         0           Cocupational Therapy         97002         Esh Additional 30 Minutes         0         0         80         50         50         0           Occupational Trerapy         97003         Encounter         0         0         80         50         50         50         0           Occupational Trerapy         97004         Encounter         0         0         80         50	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   0   0   1   1   1   1   1   1   1	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   S0   S0   S0   S0   S0   S	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Name	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy   97004   Encounter   0   0   S0   S0   S0   S0   S0   O	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97003</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         0           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97150         Encounter         0         0         SO         SO <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         SO         O         O         SO	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97140         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97150         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97530         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97532         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97533         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97535         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97537         Encounter         0         0         50         50         50         50         0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         S0         S0         S0         90         0           Occupational or Physical Therapy         97535         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97537         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97542         Encounter         0         0         S0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97750         Encounter         0         0         S0         S0         S0         S0         0           Occupational Therapy         97755         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97760         Encounter         0         0         S0         S0         S0         S0         S0         0	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Gogebic				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	9	21	\$7,925	\$881	\$377	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	15	32	\$9,729	\$649	\$304	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	17	49	\$27,313	\$1,607	\$557	3
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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# Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service (Engrey)         New Montal (Park Color)         New Montal (Park Colo	Gogebic		yyanaa a .	26.00	Unit				aa		***
Assessment (Assistant 9326   13 minutes   0   0   59   30   90   0   0   Assessment (Assistant 9327   13 Minutes   0   0   14   13   30   90   90   0   0   Assessment (Assistant 9327   15 Minutes   0   0   14   13   30   90   90   0   0   Assessment (Assistant 9327   15 Minutes   0   0   0   15   13   13   10   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertant for Assistant	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Secondary   15 Millaris   0	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Secondary for Austrance   19727   Us   30 Manters   0   0   91   50   50   50   0   0   0   0   0   0	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Securities   9228	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austral	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn   99334   US   Executer   0   0   93   93   93   93   94   95   95   95   95   95   95   95	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Seconder   9335	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authin 99335 U.S Frecunter 0 0 0 50 50 80 50 0 0 Assessment (Authin 99336 Encounter 0 0 0 30 50 50 50 0 0 Assessment (Authin 99336 U.S Encounter 0 0 0 30 50 50 50 0 0 Assessment (Authin 99337 U.S Encounter 0 0 0 50 50 50 50 0 0 Assessment (Authin 99341 U.S Encounter 0 0 0 50 50 50 50 0 0 Assessment (Authin 99341 U.S Encounter 0 0 0 50 50 50 50 0 0 0 Assessment (Authin 99341 U.S Encounter 0 0 0 50 50 50 50 0 0 0 0 0 50 50 50 0 0 0 0 0 0 50 5	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authern 99337 US Facounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authern 99337 US Facounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authern 99341 US Facounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authern 99341 US Facounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authern 99342 US Facounter 0 0 0 50 50 50 50 50 0 0 0 0 0 0 0 0 0	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9337 U5 Eacounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99341 U5 Eacounter 0 0 0 50 50 50 50 0 0 0 50 50 50 50 0 0 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 93341 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9340 US Bindures 0 0 0 50 50 50 50 0 Assessment for Authism 9340 US 30 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9340 US 30 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9350 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9350 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9360 US 70 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9360 US 70 Minute	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99343 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99344 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99344 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99344 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99344 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99344 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99345 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99347 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99347 Bencounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99347 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 Bencounter 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99343 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99343 U.5 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 U.5 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 U.5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99344 U.5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aurism 99344 U.5 Encounter 0 0 0 50 50 50 50 50 0 0 0 0 0 50 50 50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 5 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 SO SO SO SO O O Assessment 99345 Encounter 0 0 0 SO SO SO SO O O Assessment for Autism 99345 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99347 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99347 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99348 Encounter 0 0 0 SO SO SO SO O O O O SO SO SO SO O O O	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Medication Management         99506         15 Minutes	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         50         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Gogebic				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$531	\$531	\$531	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	3	7	\$1,737	\$579	\$248	2
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	13	13	\$7,359	\$566	\$566	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	22	24	\$7,416	\$337	\$309	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	23	2,852	\$200,068	\$8,699	\$70	124
Home Based Services		H0036	ST	Encounter	1	23	\$1,613	\$1,613	\$70	23
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Gogebic				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	1	3	\$227	\$227	\$76	3
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	7	57	\$1,549	\$221	\$27	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	6	311	\$5,458	\$910	\$18	52
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP	-	S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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Gogebic	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cont/Conn	Cost/Unit	Unit/Case
Service Category	Revenue Code		Modifier	Measure				Cost/Case		
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	3	57	\$3,723	\$1,241	\$65	19
Targeted Case Management		T1017		Per Diem	21	1,006	\$66,316	\$3,158	\$66	48
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	2	3	\$958	\$479	\$319	2
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

## Gogebic Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Substance Abuse Services: Transportation	T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation	T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services	T2025		15 Minutes	1	5	\$109	\$109	\$22	5
Enhanced Medical Equipment-Supplies	T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention	T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance	T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services	T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services	T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)			Encounter	0	0	\$0	\$0	\$0	0
Other			Month	0	0	\$0	\$0	\$0	0
Aggregate for T Codes	ALL	·	Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>				62		\$359,448			

# Chi

Children with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 2014
illidicii witii Scrious Eliiotioliai Disturbance	OOD ELEMENT OOOT KEI OKT.	1 15Cai 1 Cai 2014

Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	3	435	\$97,005	\$32,335	\$223	145
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	3	26	\$8,639	\$2,880	\$332	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	25	201	\$65,586	\$2,623	\$326	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	16	99	\$2,475	\$155	\$25	6

Notice Control   Notice   No	Gratiot				Unit						
Machement   1979   1970   19	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mesement for Austrain	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
December   907h;   Encounter   13   13   53,600   523   523   523   1	Assessment		90791			0	0	\$0	\$0	\$0	0
	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	13	13	\$3,680	\$283	\$283	1
Subseance above: Opposited Care   0003, (1906, 1904   90832)   Becounter   0   0   0   50   50   50   0   0	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   90133   Encounter   0   0   0   0   0   90   90   90   0	Mental Health: Outpatient Care		90832		Encounter	32	95	\$10,338	\$323	\$109	3
Secondary for Authors   90813   U5   Encounter   0   0   90   90   90   90   90   90	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mercal Health Computers Care   98034   Encounter   72   580   \$74,131   \$1,020   \$135   \$8   \$50   \$500,000,000,0014, 0015,0014, 0015,0014,0014, 0015,0014,0014,0014,0014,0014,0014,0014,	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Solution colors: Computent Care   (900), 9006, 0014, 0015, 0016, 0019   9034   Encounter 20.30 Min   0   0   50   50   50   30   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mean Health Coluptaired Care   90856   U5   Escounter 25-30 Min   0   0   50   50   50   50   0   0   0	Mental Health: Outpatient Care		90834		Encounter	72	550	\$74,131	\$1,030	\$135	8
Assessment for Authism   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   99837   Encounter 20-30 Min   0   0   50   50   50   0   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   South	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	37	178	\$50,527	\$1,366	\$284	5
Assessment for Autism 90838 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Percapy-Family Therapy   90846   Encounter 75-80 Min   25   68   \$12,955   \$518   \$191   3	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	1	1	\$284	\$284	\$284	1
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90846         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90847         Encounter 75-80 Min         38         216         \$29,349         \$772         \$136         6           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 20-30 Min         0         0         \$0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	25	68	\$12,955	\$518	\$191	3
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0019         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Therapy-Group Therapy         90853         Encounter 20-30 Min         11         85         \$2,694         \$245         \$32         8           Substance Abuse: Outpatient Treatment         9908,0906, 0914, 0918         90853         Encounter 45-50 Min         0         0         \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Paramy   P	Therapy-Family Therapy		90847		Encounter 75-80 Min	38	216	\$29,349	\$772	\$136	6
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   11   85   \$2,694   \$245   \$32   85	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   11   85   \$2,694   \$245   \$32   8	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	11	85	\$2,694	\$245	\$32	8
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Processing Server   Process   Proc	Gratiot				Unit						
Special Entanguer Entrey         92-24         Encounter 8-30 Min         0         50         50         50         0           Special Entanguer Entrey         92-26         Encounter 7-50 Min         0         50         50         0         0         50         50         0         0         50         50         0         0         50         50         0         0         0         50         50         0         0         0         50         50         0         0         50         50         0         0         50         50         0         0         25         20         25         20         25         20         25         20         20         20         30         30         30         0         20         20         30         30         30         0         20         20         30         30         30         0         20         20         30         30         30         30         0         20         30         30         30         30         30         30         30         30         30         30         30         30         30         30         30         30         30         30	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Energy   92256   Recenter 7-80 Wiles   0   0   91   92   93   0   0	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Today   PSYCLIPTYS   9400   Psychological A-5-90 Mex   1 9   \$2.296   \$32.46   \$35.44   \$9.45     Psychological Today   PSYCLIPTYS   \$400   \$10	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Authors	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Todag by Technician   96102   U5 Normans   0	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	9	\$2,286	\$2,286	\$254	9
Accounted the Austion	Assessment for Autism		96101	U5	Encounter 75-80 Min	10	48	\$11,572	\$1,157	\$241	5
Psychological Tening by Comp   96108   30 Minutes   0   0   90   90   90   90   90   90	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Manates 0 0 0 50 50 50 50 00 Assessment-Other 96110 30 Manates 0 0 0 50 50 50 50 00 00 50 50 50 50 00 50 5	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Scher   96110   30 Minutes   0   0   50   50   50   0   0   Assessment Scher   96111   44 Minutes   0   0   50   50   50   0   0   0   0	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Other   Sel11	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neumophyline is by PsychiPhys   96118	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teat by PsyckPhys   96118	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Aurism  Neuropsych test by Tech  90119  105  600 Minutes  0  0  0  50  50  50  50  0  0  Neuropsych test Admin w Comp  Neuropsych test Admin	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authism   96119   U5   60 Minutes   0   0   S0   S0   S0   S0   S0   S0	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin wComp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   0   0   1   1   1   1   1   1   1	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   S0   S0   S0   S0   S0   S	Medication Administration		96372		60 Minutes	4	4	\$260	\$65	\$65	1
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy   97004   Encounter   0   0   S0   S0   S0   S0   0	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97003</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97116         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97124         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97140         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97150         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97530         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97533         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97535         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97537         Encounter         0         0         <	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97140         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97150         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97530         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97532         Encounter         0         0         50         50         50         50         0           Occupational or Physical Therapy         97533         Encounter         0         0         50         50         50         50         0         0           Occupational or Physical Therapy         97535         Encounter         0         0         50         50         50         50         0         0           Occupational or Physical Therapy         97537         Encounter         0         0         50         50         50         50         0         0         <	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97535         Encounter         0         0         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         O         O         O         SO         SO         SO         SO         SO         O         O         SO         SO         SO         SO         SO         O         O         SO         SO         SO         SO         SO         SO         O         O         SO         SO </td <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Part	Gratiot				Unit						
Assertance   Albanic Services   97800   Each Authorises   97800   Ea	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97804   Real-Additional IS   0   0   30   30   50   70   70	Assessment or Health Services		97802		Encounter	3	18	\$3,358	\$1,119	\$187	6
Solumer Abase: Augmenter	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Deletance Abne. Aspective   9781   Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
No. Places Foundation and Management   99,001   16   16   16   17   17   18   18   19   19   19   19   19   19	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parkent Evaluation and Management   99201   U5   Heur   0 0 0 30 30 30 30 30 0 0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Pasient Fishalation and Management   99,001   Per Houre   0   0   50   50   50   50   0	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Antision	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Atome: New Pairent Evaluation and Management   99.01   Excounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99204   Per Hour   0   0   S0   S0   S0   S0   O   New Patient Evaluation and Management   99205   U5   Per Hour   0   0   S0   S0   S0   S0   O   Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O   Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99211   Per Hour   0   0   S0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99211   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99212   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99212   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99213   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99213   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99214   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99214   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99214   U5   I5 Minutes   S8   I56   S18/984   S327   S122   3   Assessment for Autism   99215   U5   I5 Minutes   S8   I56   S18/984   S327   S12   3   Assessment for Autism   99215   U5   I5 Minutes   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99214   U5   I5 Minutes   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99215   U5   I5 Minutes   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99215   U5   I5 Minutes   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99215   U5   I5 Minutes   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99215   U5   I5 Minutes   0   0   S0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Parient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   S0   S0	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 0 Subtanance Abuser. New Patient Evaluation and Management 99211 Per Hour 0 0 0 0 50 50 50 50 0 0 0 Established Patient Evaluation and Management 99211 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Established Patient Evaluation and Management 99211 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abase: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Seesement for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   0   0   S0   S0   S0   S0   0     Assessment for Autism   99213   Encounter   0   0   S0   S0   S0   S0   0     Assessment for Autism   99213   Encounter   0   0   S0   S0   S0   S0   0     Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0     Established Patient Evaluation and Management   99214   U5   Encounter   0   0   S0   S0   S0   S0   S0   S0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0   0   0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99213         U5         Encounter         0         0         SO         SO         SO         O           Established Patient Evaluation and Management         99214         U5         15 Minutes         58         156         \$18,984         \$327         \$122         3           Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214	Established Patient Evaluation and Management		99213		Encounter	6	7	\$570	\$95	\$81	1
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Stabilished Patient Evaluation and Management   99215   15 Minutes   0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Established Patient Evaluation and Management		99214		15 Minutes	58	156	\$18,984	\$327	\$122	3
Assessment for Autisim         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         9         10         \$4,597         \$511         \$460         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99222         15 Minutes         9         10         \$4,597         \$511         \$460         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	9	10	\$4,597	\$511	\$460	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         1         1         \$108         \$108         \$108         1           Additional Codes-Physician Services         99232         15 Minutes         9         60         \$35,223         \$3,914         \$587         7           Additional Codes-Physician Services         99233         15 Minutes         0         0         \$0<	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         1         1         \$108	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         9         60         \$35,223         \$3,914         \$587         7           Additional Codes-Physician Services         99233         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	1	1	\$108	\$108	\$108	1
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>9</td> <td>60</td> <td>\$35,223</td> <td>\$3,914</td> <td>\$587</td> <td>7</td>	Additional Codes-Physician Services		99232		15 Minutes	9	60	\$35,223	\$3,914	\$587	7
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Mesement for Nation	Gratiot			26.119	Unit				aa		***
Descriment   19326	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Secretary for Austrant   99235   US   13 Minutes   0   0   30   30   30   90   0	Assessment for Autism		99325	U5	15 Minutes		0				0
Assessment   9937   15 Minutes   0   0   93   53   50   0	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Seconside   99.238	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accounter   April	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Accounter for Aurism	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authum 99335 U.S. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99336 D.S. Excounter 0 0 0 50 50 50 50 0 Assessment for Authum 99337 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99337 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99331 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99331 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99341 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99341 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99341 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99342 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99343 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99344 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99345 L. Fincounter 0 0 0 50 50 50 50 0 Assessment for Authum 99347 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99349 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99349 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99349 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 99340 L. Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authum 9	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn  Assessment  Assess	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 9317	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99337 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99341 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99343 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 99349 U5 Boldmanter 0 0 0 50 50 50 50 0 Assessment for Authism 99340 Financiation 993	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99377 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 To Minutes 0 0 0 50 50 50 50 50 0 Assessment for Aurism 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 0  Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 50 0  Assessment for Autism 49340 Encounter 0 0 0 50 50 50 50 50 0  Assessment for Autism 493	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austism 99341 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99342 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99343 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99343 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Austism 99344 U5 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99345 U5 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99345 U5 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99347 U5 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99348 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99348 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99348 U5 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Austism 99348 U5 Encounter 0 0 0 80 80 80 80 80 80 80 80 80 80 80 8	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Aurism 99342	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9943 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9944 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment for Autism 99345 Encounter 0 0 0 S0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         0           Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         50 Minutes         0         0         SO         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         \$0         \$0         0           Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         9956         15 Minutes         0         0         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0100         Encounter         0         0         50         50         50	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         50         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Transportation         A0100         35 Minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0110         Encounter         0         0         50         50         50         50         0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         0           Transportation         A0100         35 Minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0100         Encounter         0         0         50         50         50         0           Transportation         A0110         Encounter         0         0         50         50         50         0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	47	47	\$12,409	\$264	\$264	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	245	255	\$55,726	\$227	\$219	1
Assessment for Autism		H0031	U5	Encounter	4	4	\$916	\$229	\$229	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	64	65	\$14,364	\$224	\$221	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	167	13,712	\$816,695	\$4,890	\$60	82
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	42	\$1,517	\$1,517	\$36	42
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	35	245	\$11,158	\$319	\$46	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	9	241	\$861	\$96	\$4	27
Community Living Supports (15 Minutes)		H2015		Encounter	1	421	\$3,461	\$3,461	\$8	421
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	6	4,934	\$85,013	\$14,169	\$17	822
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	7	945	\$32,417	\$4,631	\$34	135
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	19	148	\$1,581	\$83	\$11	8
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	66	197	\$23,837	\$361	\$121	3
Respite Care		T1005		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	3	10,062	\$33,439	\$11,146	\$3	3,354
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	6	313	\$1,002	\$167	\$3	52
Targeted Case Management		T1017		Per Diem	118	3,195	\$119,765	\$1,015	\$37	27
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	41	60	\$14,316	\$349	\$239	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001	-	15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	3	15	\$1,937	\$646	\$129	5
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other	-			Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					452		\$1,665,035			

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	107	\$424,119	\$212,060	\$3,964	54
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	2	22	\$15,827	\$7,914	\$719	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	15	80	\$57,553	\$3,837	\$719	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	8	12	\$6,287	\$786	\$524	2

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	2	2	\$1,217	\$608	\$608	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	33	49	\$3,014	\$91	\$62	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	43	65	\$6,568	\$153	\$101	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	147	816	\$108,699	\$739	\$133	6
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	4	26	\$2,992	\$748	\$115	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	19	43	\$5,301	\$279	\$123	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	·	90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 45-50 Min

Encounter 75-80 Min

Encounter 75-80 Min

Encounter 75-80 Min

Encounter 75-80 Min

Encounter 20-30 Min

Encounter 20-30 Min

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\$1,526

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Substance Abuse: Outpatient Treatment

Substance Abuse: Outpatient Treatment

Additional Codes-ECT Physician

Additional Codes-ECT Physician

Speech & Language Therapy

Speech & Language Therapy

Speech & Language Therapy

Speech & Language Therapy

Pharmacological Management (SED Waiver)

Speech & Language Therapy (Retired 1/1/14)

Therapy-Group Therapy

Assessments-Other

0900, 0906, 0914,

0915, 0916, 0919

0900, 0906, 0914,

0915, 0916, 0919

0901

90849

90853

90863

90870

90887

92506

92507

92508

92521

92522

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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processed Language Throng	Hiawatha				Unit						
Speech & Language Theory   92554   Proceeds 45-50 Mbm   0   0   91   90   91   90   91   90   92   90   93   90   91   90   94   90   95   90   90   90   90   90   90	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Second Language Theory   9226   Resourter 75.00 Man   0   0   50   50   50   0   0   0   0	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYLEPINS   94101   Discourter 45: 80 Min   0   0   91   91   93   93   90     Psychological Testing by Technician   94102   Discourter 75: 80 Min   0   0   91   93   93   90     Psychological Testing by Technician   94102   Discourter 75: 80 Min   0   0   93   93   93   90     Datassement for Autrina   94102   US   So Ministra   0   0   93   93   93   90     Datassement for Autrina   94102   US   So Ministra   0   0   93   93   93   90     Datassement Cheer   94105   30 Ministra   0   0   93   93   93   90     Datassement Cheer   94107   30 Ministra   0   0   93   93   95   90     Datassement Cheer   94107   30 Ministra   0   0   93   93   95   90     Datassement Cheer   94107   44 Ministra   0   0   93   93   95   90     Datassement Cheer   94107   44 Ministra   0   0   93   93   95   90     Datassement Cheer   94107   44 Ministra   0   0   93   93   95   90   90     Datassement Cheer   94107   44 Ministra   0   0   93   93   95   90   90   90   90   90   90   90	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Accounter for Antinim	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Pythological Testing by Technicism	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Authors   Psychological Testing by Comp   96103   30 Minates   0   0   30   30   30   30   0     Psychological Testing by Comp   96103   30 Minates   0   0   30   30   30   0     Assessment-Otter   96110   30 Minates   0   0   50   50   50   0     Assessment-Otter   96111   45 Minates   0   0   50   50   50   0     Assessment-Otter   96111   45 Minates   0   0   50   50   50   0     North-Otter   96111   45 Minates   0   0   50   50   50   50   0     North-Otter   96118   45 Minates   0   0   50   50   50   50   0     North-Otter   96118   45 Minates   0   0   50   50   50   50   0     Assessment for Authors   96118   45 Minates   0   0   50   50   50   50   0     Assessment for Authors   96118   U5   45 Minates   0   0   50   50   50   50   0     Assessment for Authors   96118   U5   45 Minates   0   0   50   50   50   50   0     Assessment for Authors   96118   U5   46 Minates   0   0   50   50   50   50   0     Assessment for Authors   96119   U5   60 Minates   0   0   50   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   50   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   50   50   0     Assessment for Authors   96120   U5   60 Minates   0   0   0   0   0   0   0   0     Assessment for Authors   96120   U5   0   0   0   0   0   0   0   0   0	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Compa   96013   90 Minutes   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Minutes 0 0 5 50 50 50 0 0 Assessment-Other 96110 30 Minutes 0 0 0 50 50 50 50 0 0 Assessment-Other 96111 4 54 Minutes 0 0 0 50 50 50 50 0 0 Norto-Other-Assessment-Other 96111 4 54 Minutes 0 0 0 50 50 50 50 0 0 Norto-Other-Assessment Popular Place Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment-Other 96110 930 Minutes 0 0 5 50 90 90 0 Assessment-Other 96111 45 Minutes 0 0 0 5 50 50 50 0 0 Neuropoyle test by Psych Phys 96118 45 Minutes 0 0 0 5 50 50 50 0 0 Neuropoyle test by Psych Phys 96118 45 Minutes 0 0 0 5 50 50 50 0 0 Neuropoyle test by Psych Phys 96118 US 44 Minutes 0 0 0 5 50 50 50 50 0 0 Neuropoyle test by Psych Phys Neuropoyle test by Tech 96119 06 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropoyle test by Tech 96119 US 60 Neuropoyle Tech 96119 US 60 Neuropoyle test by Tech 96119 US 60 Neuropoyle Tech 96119 US 60 Neur	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neurophysical Stame St	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Mempsychet by PsychPhys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authin   96118   U5	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychient by Tech   96119	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism         96119         US         60 Minutes         0         0         30         30         30         0           Neuropsych test Admin wCOorp         96120         60 Minutes         0         0         30         30         30         0           Medication Administration         96372         60 Minutes         0         0         30         30         30         0           Physical Therapy         97001         First 30-74 Min.         0         0         30         30         30         0           Physical Therapy         97002         Each Additional 30         0         0         30         30         30         0           Occupational Therapy         97003         Encounter         0         0         30         30         30         0         0           Occupational Therapy         97004         Encounter         0         0         30	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin wComp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   50   50	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   Propose   Propo	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97114         Encounter         0         0         SO	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97113         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97114         Encounter         0         0         S0         <	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         SO         O         O         SO	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Sayon, Capagor         Romanuer (Bornaco)         William (Processed)         Open of Deciminary         Open of De	Hiawatha				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Pauli Services   97804	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Solitanies Abner: Acquancians	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Assignment   9581   Faccounter   0   0   50   50   50   0   0   0   0	Health Services		97804			0	0	\$0	\$0	\$0	0
New Partier Evaluation and Management   99,011   105   10	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Accessment for Auritime	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Pinter Richatton and Minagement	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Parletent Evaluation and Management   99200	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autrins	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Above: New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   50   50	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99004	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99204		Encounter	2	2	\$992	\$496	\$496	1
New Patient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	41	41	\$26,944	\$657	\$657	1
Established Patient Evaluation and Management   99211	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99211 U5 Encounter 0 0 0 50 50 50 50 0 0 Established Patient Evaluation and Management 99212 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99212 U5 Encounter 9 10 \$15.56 \$173 \$156 \$1 \$15 \$15 \$15 \$1 \$1 \$3 \$15 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism         99212         U5         Encounter         0         0         80         80         80         0           Established Patient Evaluation and Management         99213         U5         Encounter         9         10         \$1,556         \$173         \$1,56         1           Assessment for Autism         99213         U5         Encounter         0         0         \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   9   10   \$1,556   \$173   \$156   1	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99213         U5         Encounter         0         0         SO         SO         SO         O           Established Patient Evaluation and Management         99214         15 Minutes         89         351         \$89,617         \$1,007         \$255         4           Assessment for Autism         99214         U5         15 Minutes         0         0         \$0 <td>Assessment for Autism</td> <td></td> <td>99212</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   U5   15 Minutes   89   351   889,617   \$1,007   \$2.55   4     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99215   15 Minutes   25   32   \$15,940   \$638   \$498   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99221   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99222   15 Minutes   4   4   \$740   \$185   \$185   \$185   1     Additional Codes-Physician Services   99223   Encounter   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99232   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99233   15 Minutes   1   4   \$540   \$54	Established Patient Evaluation and Management		99213		Encounter	9	10	\$1,556	\$173	\$156	1
Assessment for Autism   99214   U5   15 Minutes   25   32   \$15,940   \$638   \$498   1	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   25   32   \$15,940   \$638   \$498   1	Established Patient Evaluation and Management		99214		15 Minutes	89	351	\$89,617	\$1,007	\$255	4
Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$185         \$185         \$1         \$1         \$4         \$4         \$4         \$740         \$185         \$185         \$1         \$1         \$4         \$4         \$4         \$740         \$185         \$185         \$1         \$1         \$4         \$4         \$740         \$185         \$185         \$1         \$1         \$4         \$4         \$740         \$185         \$185         \$1         \$1         \$4         \$40         \$0         \$185         \$185         \$1         \$1         \$4         \$40         \$0	Established Patient Evaluation and Management		99215		15 Minutes	25	32	\$15,940	\$638	\$498	1
Additional Codes-Physician Services         99222         15 Minutes         4         4         4         5740         \$185         \$185         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0         <	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	4	4	\$740	\$185	\$185	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         \$135         \$4           Assessment         99324         15 Minutes         0         0         \$0<	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         3         20         \$1,900         \$633         \$95         7           Additional Codes-Physician Services         99233         15 Minutes         1         4         \$540         \$540         \$135         4           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         1         4         \$540         \$540         \$135         4           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>3</td> <td>20</td> <td>\$1,900</td> <td>\$633</td> <td>\$95</td> <td>7</td>	Additional Codes-Physician Services		99232		15 Minutes	3	20	\$1,900	\$633	\$95	7
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Additional Codes-Physician Services		99233		15 Minutes	1	4	\$540	\$540	\$135	4
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Solitor (Agree)         Expression (Sample)         Expression (Sample)         March (Sample)         March (Sample)         Control (Sample)         Control (Sample)         Sample (Sample)         Sa	Hiawatha				Unit						
Assessment   90256   15 minutes   0   0   150   30   150   20   20   Assessment   90256   15 Minutes   0   0   16   30   30   30   30   30   30   30   3	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assentant for Austrance   9032   15   15 Manues   0   0   10   50   50   50   50   50	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Anthern	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Secure   S	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assenter for Austrian	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Aurison	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Securitor for Authorn   99334   US   Excenter   0   0   S0   50   50   50   0   0   0   0   0   0	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Seconstance   99335	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian  Assessment for Austrian  93377   Fincounter   0   0   90   50   50   50   0    Assessment of Austrian  93371   U5   Encounter   0   0   50   50   50   50   0    Assessment of Austrian  93341   Encounter   0   0   0   50   50   50   50   0    Assessment of Austrian  93341   U5   Encounter   0   0   0   50   50   50   0    Assessment of Austrian  9342   Fincounter   0   0   0   50   50   50   0    Assessment for Austrian  9342   U5   Encounter   0   0   50   50   50   50   0    Assessment for Austrian  9343   U5   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9343   U5   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9344   U5   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9344   U5   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9344   U5   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9345   Encounter   0   0   50   50   50   50   50    Assessment for Austrian  9344   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9345   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9346   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9347   Encounter   0   0   50   50   50   50    Assessment for Austrian  9348   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9349   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9349   U5   Encounter   0   0   50   50   50    Assessment for Austrian  9349   Encounter   0   0   50   50   50   50    Assessment for Austrian  9349   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian  9340   U5   Encounter   0   0   50   50   50   50    Assessment for Austrian   9349   U5   Encounter   0   0   50   50   50    Assessment for Austrian   9340   U5   Encounter   0   0   50   50   50    Assessment for Austrian   9340   U5   Encounter   0   0   50   50   50    Assessment for Austrian   9340   U5   Encounter   0   0   50	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authern 99337 US Fincemere 0 0 0 50 50 50 50 0 Assessment for Authern 99341 Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Authern 99349 Fincounterr 0 0 0 50 50 50 50 0 Assessment for Authern 99349 Fincounterr 0 0 0 50 50 50 50 0 Assessment for Authern 99349 US Encounterr 0 0 0 50 50 50 50 0 Assessment for Authern 99349 US Encounterr 0 0 0 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 50 0 Assessment for Authern 99340 US Toll Manters 0 0 0 50 50 50 50 50 0 Assessment for Authern 99340	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99337 U5 Eacounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 9341 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Authism 9342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Authism 9342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 49345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 49346 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 49345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9346 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9349 U5 Shanters 0 0 0 50 50 50 50 0 Assessment for Authism 9349 U5 Shanters 0 0 0 50 50 50 50 0 Assessment for Authism 9340 U5 Shanters 0 0 0 50 50 50 50 0 Assessment for Authism 9340 U5 Shanters 0 0 0 50 50 50 50 0 Assessment for Authism 9350 U5 TO Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9350 U5 TO Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 9350 U5 TO Minutes 0 0 0 50 50 50 50 0 Assessment for Authism 0 0 0 50 50 50 50 0 Assessment for Authism 0 0 0 50 50 50 50 0  Transportation 1 Authin	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0  Medication Administration 99350 U5 70 Minutes 0 0 0 50 50 50 50 0  Transportation A0000 15 Minutes 0 0 0 50 50 50 50 50 0  Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0  Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 0  Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9943 U5 Encounter 0 0 0 50 50 50 50 0 0 0 50 50 50 0 0 50 5	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 50 50 50 50 0 0 Assessment Markism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment Markism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment Markism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment Markism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment Markism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment Markism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment Markism 99347 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99348 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99348 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99349 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99349 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99349 U5 Bocounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99349 U5 Bocounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99349 U5 Bocounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99350 U5 Bocounter 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 0 Assessment Markism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 Markism 99350 U5 Minutes 0 0 0 50 50 50 50 0 0 0 0 0 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment Autism 99344 U5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment 99345 Encounter 0 0 0 S0 S0 S0 S0 S0 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 0 Assessment for Autism 99347 Encounter 0 0 0 S0 S0 S0 S0 S0 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 0 Assessment 99348 Encounter 0 0 0 S0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 0 99350 Encounter 0 0 50 50 50 50 50 0 Encounter 0 0 50 50 50 50 50 0 Encounter 0 0 50 50 50 50 50 50 0 Encounter 0 0 50 50 50 50 50 50 50 50 50 50 50 50	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99347 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	1	1	\$142	\$142	\$142	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	137	148	\$26,425	\$193	\$179	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	151	312	\$61,963	\$410	\$199	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$189	\$189	\$189	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	27	3,956	\$428,500	\$15,870	\$108	147
Home Based Services		H0036	ST	Encounter	3	312	\$33,727	\$11,242	\$108	104
Peer Directed and Operated Support Services	-	H0038	-	Encounter	1	4	\$119	\$119	\$30	4
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$72,863	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Category  Assertive Community Treatment (ACT)	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units		0 ./0	Contract to	
Assertive Community Treatment (ACT)				Weasure	Cascs	Ullits	Cost	Cost/Case	Cost/Unit	Unit/Case
		H0039		Encounter	1	6	\$393	\$393	\$66	6
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	91	658	\$51,600	\$567	\$78	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	16	1,360	\$5,127	\$320	\$4	85
Community Living Supports (15 Minutes)		H2015		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	1	1	\$334	\$334	\$334	1
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# nal Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	26	7,566	\$16,862	\$649	\$2	291
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			7	397	\$117,020	\$16,717	\$295	57
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	5	636	\$1,984	\$397	\$3	127
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	47	882	\$68,514	\$1,458	\$78	19
Targeted Case Management		T1017		Per Diem	19	879	\$67,929	\$3,575	\$77	46
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	24	30	\$21,260	\$886	\$709	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	-	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Hiawatha										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

293

\$1,760,017

**Total Population and Cost** 

Huron				TT 5						
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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	3	15	\$10,054	\$3,351	\$670	5
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	11	120	\$80,134	\$7,285	\$668	11
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Children with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 2014

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			25	25	\$5,585	\$223	\$223	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	1	1	\$86	\$86	\$86	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	16	27	\$2,736	\$171	\$101	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	63	403	\$84,808	\$1,346	\$210	6
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	37	92	\$23,366	\$632	\$254	2
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	1	7	\$127	\$127	\$18	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

No.	Huron				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Language Theory	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Lauragues Princery   9240   Boconter 75 80 Min   0   0   9   90   90   0   9   9   9	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Post-designal Textus PSYCHEPYS   59011	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autisian 96101 US Executed 75-90 Mile 0 0 90 90 90 90 90 90 90 90 90 90 90 90	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technicians	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Authins   96102   U5   30 Minutes   0   0   33   30   30   30   30   30	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Tenting by Course   96118   30 Mantes   0   0   90   50   50   50   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Minutes 0 0 59 59 50 50 0 Assessments-Other 96110 30 Minutes 0 0 0 50 50 50 50 0 Assessments-Other 96111 4 Minutes 0 0 0 50 50 50 50 0 Neuroblavioral Status Learn 96116 4 Minutes 0 0 0 50 50 50 50 50 50 50 Neuroblavioral Status Learn 96118 4 Minutes 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment-Other 9611 45 Minutes 0 0 5 5 5 5 5 0 0 Assessment-Other 9611 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Assessment Actual Status Exam 9616 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Neuropsych test by PsychPhys 9618 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Neuropsych test by PsychPhys 9618 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Neuropsych test by PsychPhys 9618 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Neuropsych test by PsychPhys 9618 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 Neuropsych test by PsychPhys 9618 45 Minutes 0 0 0 5 5 5 5 5 0 0 0 0 0 0 0 0 0 0 0	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Mesenscharts Clare	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych ted by PsychPhys	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teat by PsychPhys   96118	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism  90118  US 45 Minutes  0 0 0 50 50 50 50 0  Neuropsych test by Tech  9019  US 60 Minutes  0 0 0 50 50 50 50 0  Neuropsych test Admin w Comp  90120  Medication Administration  90772  60 Minutes  0 0 0 50 50 50 50 0  Medication Administration  90772  60 Minutes  0 0 0 50 50 50 50 0  Medication Administration  90772  60 Minutes  0 0 0 50 50 50 50 0  Physical Therapy  97001  Physical Therapy  97002  Each Additional 20 0 0 50 50 50 50 0  Physical Therapy  97002  Each Additional 20 0 0 50 50 50 50 0  Cocquational Therapy  97003  Eacounter  0 0 0 50 50 50 50 0  Cocquational Therapy  97110  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97112  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97114  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97116  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97140  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97140  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacounter  0 0 0 50 50 50 50 0  Cocquational or Physical Therapy  97150  Eacoun	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych text by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authon  96119 US 60 Minutes 0 0 0 50 50 50 50 0  Neuropsych fest Admin wCorop  96120 60 Minutes 0 0 0 50 50 50 50 0  Physical Therapy  97001 First 30-74 Min. 0 0 5 50 50 50 50 50  Physical Therapy  97002 Each Additional 30 0 0 50 50 50 50 50 50  Physical Therapy  97003 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   0   0   1   1   1   1   1   1   1	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   0	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97150         Encounter         0         0         SO         S	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97113         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97114         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         S	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy   97112   Encounter   0   0   50   50   50   50   0	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         <	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Huron				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	3	3	\$554	\$185	\$185	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	45	167	\$14,572	\$324	\$87	4
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	18	26	\$3,211	\$178	\$124	1
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	4	4	\$729	\$182	\$182	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	1	1	\$104	\$104	\$104	1
Additional Codes-Physician Services		99222		15 Minutes	10	15	\$2,112	\$211	\$141	2
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	1	4	\$175	\$175	\$44	4
Additional Codes-Physician Services		99232		15 Minutes	9	52	\$4,126	\$458	\$79	6
Additional Codes-Physician Services		99233		15 Minutes	4	23	\$2,671	\$668	\$116	6
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

### SUB-ELEMENT COST REPORT: Fiscal Year 2014 Huron Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure

Mesenmen Se Animan   99325   US   1 Minutes   0   0   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Non-security for Authors	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors  Assess	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Monement for Audism	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Accounter   99128   Pacounter   0   0   90   90   90   90   90   90	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austrom	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accessment   99314	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authans 9733 US Excounter 0 0 0 59 90 90 Assessment for Authans 9735 US Excounter 0 0 0 50 50 50 Assessment for Authans 9735 US Excounter 0 0 0 50 50 50 Assessment for Authans 9735 US Excounter 0 0 0 50 50 50 Assessment for Authans 9736 US Excounter 0 0 0 50 50 50 Assessment for Authans 9737 US Excounter 0 0 0 50 50 50 Assessment for Authans 9737 US Excounter 0 0 0 50 50 50 Assessment for Authans 9737 US Excounter 0 0 0 50 50 50 Assessment for Authans 9734 US Excounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US Decounter 0 0 0 50 50 50 Assessment for Authans 9735 US	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Accessment for Authum	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audism 9335 US Excounter 0 0 0 50 50 50 50 Assessment for Audism 9336 US Excounter 0 0 0 50 50 50 50 Assessment for Audism 9337 Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9337 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9341 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9341 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9341 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9342 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9342 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9343 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9345 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9344 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9345 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9347 Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9348 US Fecunter 0 0 0 50 50 50 50 Assessment for Audism 9349 US Fecunter 0 0 0 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50 50  50 50 50 50  50 50 50 50  50 50 50 50  50 50 50 50  50 50 50 50  50 50 50 50  50	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99337 US Encounter 0 0 0 80 80 80 80 80 80 80 80 80 80 80	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Ass	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99341 U.5 Excounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99342   Broounter   0   0   50   50   50   50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 Assessment of Autism 99343 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 Assessment Autism 99348 U5 Encounter 0 0 0 50 50 50 Assessment Autism 99348 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 Assessment for Autism 99340 U5 Bnounter 0 0 0 50 50 50 Assessment for Autism 99340 U5 Bnounter 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Assessment for Autism 99350 U5 FN Minutes 0 0 0 50 50 50 Transportation A0090 Si Minutes 0 0 0 50 50 50 Assessment for Autism 0 50 50 50 50 Transportation A0100 Encounter 0 0 0 50 50 50 A010000000000000000000000000000000000	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   Encounter   0   0   50   50   50   50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   9934   U5   Encounter   0   0   50   50   50   50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism   99344   Encounter   0   0   50   50   50   50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99344         U5         Encounter         0         0         SO         SO         SO           Assessment         99345         Encounter         0         0         SO         SO         SO           Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO           Assessment for Autism	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         Encounter         0         0         \$0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO           Assessment         99347         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO           Assessment for Autism         99349         U5         30 minutes         0         0         SO         SO         SO           Assessment for Autism         99349         U5         30 minutes         0         0         SO         SO         SO           Assessment for Autism         99349         U5         30 minutes         0         0         SO         SO         SO           Assessment for Autism         99349         U5         30 minutes         0         0         SO         SO         SO           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         50         50         \$0           Assessment for Autism         99347         U5         Encounter         0         0         \$	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         50         50         50           Assessment         99349         Encounter         0         0         50         50         50           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50           Assessment         99350         U5         70 Minutes         0         0         50         50         50           Medication Administration         99506         15 Minutes         0         0         50         50         50           Medication Management         99605         35 Minutes         0         0         50         50         50           Transportation         A0080         15 Minutes         0         0         50         50         50           Transportation         A0090         25 minutes         0         0         50         50         50           Substance Abuse: Transportation         A0100         Encounter         0         0         50         50         50           Faccounter         0         0         50         50         50 <td< td=""><td>Assessment for Autism</td><td></td><td>99347</td><td>U5</td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0         \$0         \$0         \$0           Transportation         A0100         35 Minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0         \$0         \$0         \$0           Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Transportation A0110 Engagnets 0 0 0 00 00 00	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse. Hansportation 40110 Encounter 0 0 50 \$0 \$0	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	86	139	\$14,773	\$172	\$106	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	2	2	\$92	\$46	\$46	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	30	48	\$6,251	\$208	\$130	2
Home Based Services		H0036		Encounter	51	5,684	\$332,305	\$6,516	\$58	111
Home Based Services		H0036	ST	Encounter	1	60	\$4,339	\$4,339	\$72	60
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	9	21	\$3,028	\$336	\$144	2
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	6	15	\$2,094	\$349	\$140	3
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	7	26	\$4,568	\$653	\$176	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	6	164	\$6,405	\$1,068	\$39	27
Community Living Supports (15 Minutes)		H2015		Encounter	1	320	\$1,153	\$1,153	\$4	320
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	2	4	\$285	\$142	\$71	2
Respite Care		T1005		Encounter	8	5,174	\$13,659	\$1,707	\$3	647
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	2	50	\$2,451	\$1,226	\$49	25
Targeted Case Management		T1017		Per Diem	22	1,048	\$49,858	\$2,266	\$48	48
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	34	46	\$23,228	\$683	\$505	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	8	63	\$6,098	\$762	\$97	8
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					149		\$705,736			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Secure Depuls   Reverse Depuls   Reverse Depuls   Person   Perso	Ionia				Unit						
Control   Cont	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	State Psychiatric Hospital - Inpatient PT22			PT22	Days	0	0	\$0	\$0	\$0	0
Decide Psyshamic Monitary PT73   Digos   4   55   \$17.70   \$1.00   \$	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Pageine Hespital Ancillary Services - Romand Roma	Local Psychiatric Hospital/IMD PT68			PT68	Days	2	13	\$17,908	\$8,954	\$1,378	7
Equation Hopspilal Ancelliny Services - Leave of Abonese   OSS 0250, 45, 927, 925   Days	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	4	35	\$17,120	\$4,280	\$489	9
Experient Hospital Ancellarly Services - Nacional Surgical Surgicions   Control Cont	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hospital Auxiliary Services - Markenia Surgical Singulars   100   10   10   10   10   10   10	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Paperies	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Equition Hospital Ancillary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
ECT Anesthesis	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Inputient Hospital Aucillary Services - Respiratory Services   0410	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Physical Therapy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillury Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Papatient Hospital Ancillary Services - Speech-Language   0440-0444	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Impatient Hospital Ancillary Services - Emergency Room   0450	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Technology (MRT)	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge         0901         # of tests         0         0         \$	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric/Psychological Partial Hospital Ancillary Services - Psychiatric/Psychological Op11, 0914-0919	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Compatient Partial Hospitalization   0912   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services				Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services         0940-0942         Days         0         0         \$0	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services         Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	59	76	\$75,035	\$1,272	\$987	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	13	17	\$855	\$66	\$50	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	65	145	\$14,587	\$224	\$101	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	96	328	\$49,496	\$516	\$151	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	69	303	\$35,799	\$519	\$118	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	166	1,016	\$85,573	\$515	\$84	6
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	43	280	\$10,481	\$244	\$37	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ionia				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0

# Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Personal P	Ionia				Unit						
Personal P	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Missiane Abne: Augustum	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Substance Abser: Acquirent   Part   Excounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
New Placian Foliantion and Management   99.011   15   New Place   0   0   50   50   50   0   0   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parlame Evaluation and Management   92322   Per Hour   0   0   30   30   30   30   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Peterie Fischalation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Ascessment for Authins	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Fouluation and Management   99,003	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Accessment for Authinn	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patent Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Executater   0   0   S0   S0   S0   S0   S0   S0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Alvase: New Patient Evaluation and Management   99204   Per Hour   0   0   50   50   50   0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205   Hour   0   0   50   50   50   50   0	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 Substance Abuse: New Parient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 50 50 Substance Abuse: New Parient Evaluation and Management 99211 U5 Encounter 0 0 0 50 50 50 50 50 50 Established Parient Evaluation and Management 99212 Established Parient Evaluation and Management 99212 U5 Encounter 0 0 0 50 50 50 50 50 50 Established Parient Evaluation and Management 99212 U5 Encounter 0 0 0 50 50 50 50 50 50 Established Parient Evaluation and Management 99213 U5 Encounter 4 8 5 53.238 5809 5405 2 Assessment for Autism 99214 Established Parient Evaluation and Management 99213 U5 Encounter 4 8 5 53.238 5809 5405 2 Assessment for Autism 99214 15 Minutes 138 364 5147,328 51,068 5405 3 Established Parient Evaluation and Management 99214 15 Minutes 138 364 5147,328 51,068 5405 3 Assessment for Autism 99214 U5 15 Minutes 0 0 0 50 50 50 50 Established Parient Evaluation and Management 99215 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99221 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99224 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99224 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99224 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99224 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99224 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99225 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99226 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99221 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99221 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99221 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99221 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99231 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99231 15 Minutes 0 0 0 50 50 50 50 Additional Codes-Physician Services 99231 15 Minutes 0	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   50   50   50   0	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212 U5 Encounter   0 0 0 80 80 80 80 0 0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99213   U5   Encounter   0   0   SO   SO   SO   SO   O	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   138   364   \$147,328   \$1,068   \$405   3     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99215   15 Minutes   53   173   \$70,021   \$1,321   \$405   3     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99221   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99222   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99223   Encounter   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99232   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99233   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99234   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	4	8	\$3,238	\$809	\$405	2
Assessment for Autism         99214         U5         15 Minutes         0         0         80         80         80         0           Established Patient Evaluation and Management         99215         15 Minutes         53         173         \$70,021         \$1,321         \$405         3           Assessment for Autism         99215         U5         15 Minutes         0         0         50         50         \$0         0           Additional Codes-Physician Services         99221         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         \$0 <td>Assessment for Autism</td> <td></td> <td>99213</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         53         173         \$70,021         \$1,321         \$405         3           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99214		15 Minutes	138	364	\$147,328	\$1,068	\$405	3
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         50         50         50         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99233         15 Minutes         0         0         50         50         50         0           Assessment         99324         15 Minutes         0 <td>Established Patient Evaluation and Management</td> <td></td> <td>99215</td> <td></td> <td>15 Minutes</td> <td>53</td> <td>173</td> <td>\$70,021</td> <td>\$1,321</td> <td>\$405</td> <td>3</td>	Established Patient Evaluation and Management		99215		15 Minutes	53	173	\$70,021	\$1,321	\$405	3
Additional Codes-Physician Services         99222         15 Minutes         0         0         \$	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         \$	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes		0	\$0	\$0	\$0	0
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	271	354	\$58,803	\$217	\$166	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	5	19	\$8,979	\$1,796	\$473	4
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	133	183	\$23,976	\$180	\$131	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	126	213	\$16,694	\$132	\$78	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	239	17,997	\$1,263,165	\$5,285	\$70	75
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# urbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	15	102	\$5,250	\$350	\$51	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	10	1,518	\$10,091	\$1,009	\$7	152
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	2	178	\$43,519	\$21,759	\$244	89
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	12	99	\$20,962	\$1,747	\$212	8
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# bance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	2	2	\$289	\$144	\$144	1
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$61	\$61	\$61	1
Health Services		T1002		15 Minutes	7	16	\$618	\$88	\$39	2
Respite Care		T1005		Encounter	24	15,961	\$112,026	\$4,668	\$7	665
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	2	16	\$992	\$496	\$62	8
Targeted Case Management		T1017		Per Diem	21	416	\$25,792	\$1,228	\$62	20
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	28	65	\$33,737	\$1,205	\$519	2
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

### Ionia Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2003 Hour 0 Transportation T2004 Per Diem 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2004 15 Minutes 0 0 \$0 \$0 \$0 0 Transportation T2005 Encounter Face-to-Face, 0 0 \$0 \$0 \$0 0 generally less than 10 minutes Substance Abuse Services: Transportation T2005 Per Mile 0 0 \$0 \$0 \$0 0 T2024 0 0 \$0 \$0 \$0 0 Prevention Services - Direct Model 15 Minutes T2025 \$2,340 \$585 Fiscal Intermediary Services 15 Minutes 4 16 \$146 4 Enhanced Medical Equipment-Supplies T2028 0 0 \$0 \$0 \$0 0 Encounter T2029 0 \$0 \$0 0 Enhanced Medical Equipment-Supplies Encounter 0 \$0 Crisis Intervention T2034 Encounter 0 0 \$0 \$0 \$0 0 Respite Care 0 T2036 Encounter 0 \$0 \$0 \$0 0 T2037 0 0 \$0 \$0 \$0 0 Respite Care Days 0 \$0 T2038 0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies T2039 15 Minutes 0 0 \$0 \$0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 0 \$0

Encounter

Month

Service

ALL

SUB-ELEMENT COST REPORT: Fiscal Year 2014

0

0

0

446

0

0

0

\$0

\$0

\$0

\$2,154,735

\$0

\$0

\$0

Division of Quality Management and Planning Michigan Department of Health and Human Services (Formerly known as Michigan Department of Community Health)

Pharmacy (Drugs and Other Biologicals)

Other

Aggregate for 'J' Codes

**Total Population and Cost** 

State of Michigan

0

0

0

\$0

\$0

Professional programmer   Professional professional programmer   Professional programmer   Professional professional professional programmer   Professional pro	Kalamazoo				Unit						
Part	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	State Psychiatric Hospital - Inpatient PT22			PT22	Days	5	412	\$91,876	\$18,375	\$223	82
Carl Popularian Roman all Bound   1973   1984   1978   1985   1	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Page   18   19   19   19   19   19   19   19	Local Psychiatric Hospital/IMD PT68			PT68	Days	9	86	\$72,820	\$8,091	\$847	10
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	56	380	\$295,129	\$5,270	\$777	7
	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hispail Ascillary Services - Aberical Singuiged Singuiged and Devises   Days   Da	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Pagisizer Hospital Ascillary Services - Lalouriusry   0300-0302, 0305-0307   0   0   0   0   50   50   50   50	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Imputient Hospital Ancillary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
Section   Comparison   Compar	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Respiratory Services   Out	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Occupational Therapy   0420-0424	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Papelient Hospital Ancillary Services - Speech-Language   0440-0444   # of treatments   0   0   50   50   50   50   50   50	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762   # of tests   0   0   50   50   50   50   0	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge   0901	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric/Psychological Partial Hospital Ancillary Services - Psychiatric/Psychological O911, 0914-0919	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Treatments/Services   0911, 0914-0919     Encounter   8   29   \$11,644   \$1,456   \$402   4	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services				Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   0   0   50   \$0   \$0   \$0   \$0   Inpatient Hospital Ancillary Services - Other Therapeutic   0940-0942   Days   0   0   0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0912			Encounter	8	29	\$11,644	\$1,456	\$402	4
Inpatient Hospital Ancillary Services - Other Therapeutic Services   Days   D	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Servest (Company   Servest (Co	Kalamazoo				Unit						
Second   S	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Security   Security	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
	Assessment		90791			59	60	\$8,551	\$145	\$143	1
Assessment for Authors	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	149	150	\$122,971	\$825	\$820	1
Substance Above: Cupration Cure   0000, 1900, 1901, 1901, 901   90832   Encounter   0 0 0 0 50 50 50 50 0 0	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Marie   Mari	Mental Health: Outpatient Care		90832		Encounter	22	70	\$2,567	\$117	\$37	3
	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Memial Health Columnier   1991   1,742   1311,729   5736   576   10	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance above: Outputient Circ   0900, 0906, 6914, 0916, 910   9034   Bircounter   0   0   50   50   50   50   0   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health Computence For Austran	Mental Health: Outpatient Care		90834		Encounter	179	1,742	\$131,720	\$736	\$76	10
Assessment for Authism   90836   U5   Executer 20-30 Min   0   0   50   50   50   50   50   50	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care   90877   Encounter 20-30 Min   54   254   \$20,358   \$377   \$80   5	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   90837   Encounter 26-30 Min   0   0   50   50   50   0   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Spots	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	54	254	\$20,358	\$377	\$80	5
Assessment for Autisin   90838	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Part	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   0   S0   S0   S0   S0   0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90847   Encounter 75-80 Min   57   320   \$25.001   \$439   \$78   6	Therapy-Family Therapy		90846		Encounter 75-80 Min	22	106	\$16,836	\$765	\$159	5
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   S0   S0   S0   S0   0   0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90849   Encounter 20-30 Min   0   0   S0   S0   S0   S0   0	Therapy-Family Therapy		90847		Encounter 75-80 Min	57	320	\$25,001	\$439	\$78	6
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   50   50   50   50   2   2   5   5   5   5   5   5   5   5	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   2   4   \$127   \$64   \$32   2	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	2	4	\$127	\$64	\$32	2
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         50         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)	·	92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
111111111111111111111111111111111111111	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Sproce (Support)         Revolute (Support)         (Pacific Al Longue) Thorapy         Control As Shall         Cont	Kalamazoo				Unit						
Speech & Lamage Therey         92-24         Encounter 5-30 Mm         0         59         50         50         20         0           Speech & Lamage Therey         92-26         Encounter 5-30 Mm         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         50         0         0         50<	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Reagnings   92256   Processor 75.00 Mail   0   0   90   90   90   0   0   0   0	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Special Enganger Desays   95611	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Torting PSYCHIPTYS   9810   Benomine 45-59 Mbs   0   0   50   50   50   0   0	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Auritan   96101   U5   Reconster 75-80 Min   0   0   50   50   50   50   0   0   0	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Torsign by Teclusian	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Accounter for Authans	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp   9603   30 Minutes   0   0   90   951   80   0   0   0   0   0   0   0   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessments-Other   96105   930 Minutes   0   0   30   30   30   50   0	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Ascessmers-Other	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Accounter-Other   Sel11	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropechte visor   Status Esams   98116   45 Manues   0   0   50   50   50   50   0     Neuropechte visor   SyschPhysy   96118   45 Manues   0   0   50   50   50   50   0     Neuropechte visor   SyschPhysy   96118   U5   45 Manues   0   0   0   50   50   50   50   0     Neuropechte visor   SyschPhysic   96119   U5   90 Manues   0   0   0   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   90 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   50   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   0   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   0   50   50   0     Neuropechte visor   96120   U5   960 Manues   0   0   0   0   0   0   0   0     Neuropechte visor   96120   U5   960 Manues   0   0   0   0   0   0   0   0   0	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 0 Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 0 Assessment for Autism 96119 0 60 Minutes 0 0 0 50 50 50 50 0 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuropsych test Admin wComp 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuropsych test Admin wComp 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuropsych test Admin wComp 96120 60 Minutes 0 1 1 1 527 527 527 527 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autision	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teal by Tech   96119	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Antism  9619  05  060 Minutes  00  00  00  00  00  00  00  00  00	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration   96372   60 Minutes   1   1   \$277   \$27   \$27   \$27   \$1	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   0   0   0   0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   80   80   80   80   90   90	Medication Administration		96372		60 Minutes	1	1	\$27	\$27	\$27	1
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy   97004   Encounter   0   0   S0   S0   S0   S0   O	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy   97110   Encounter   0   0   S0   S0   S0   S0   O	Occupational Therapy		97003		Encounter	3	4	\$527	\$176	\$132	1
Occupational or Physical Therapy   97112   Encounter   0   0   50   50   50   50   0	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97116         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97124         Encounter         0         0         50         50         \$0         0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97150         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97530         Encounter         4         72         \$1,281         \$320         \$18         18           Occupational or Physical Therapy         97532         Encounter         0         0         \$0	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$18         \$18           Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         4         72         \$1,281         \$320         \$18         18           Occupational or Physical Therapy         97532         Encounter         0         0         \$0	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>4</td> <td>72</td> <td>\$1,281</td> <td>\$320</td> <td>\$18</td> <td>18</td>	Occupational or Physical Therapy		97530		Encounter	4	72	\$1,281	\$320	\$18	18
Occupational or Physical Therapy         97535         Encounter         0         0         50         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         50         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Accounter of Health Services   97902   Per Bernamer   0   0   0   0   0   0   0   0   0	Kalamazoo				Unit						
Accounter or Health Services   97803	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Realth Services	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Decourse   Decourse	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Substance Alosse: Acupaneture         97811         Encounter         0         0         \$60         \$50         \$60           New Pinterit Evaluation and Management         9901         US         Hour         0         0         \$60         \$50         \$60           New Pinterit Evaluation and Management         99201         US         Hour         0         0         \$60         \$50         \$50           Assessment for Autism         99202         US         Hour         0         0         \$60         \$50         \$50         \$60           Assessment for Autism         99202         US         Hour         0         0         \$50         \$50         \$50           Assessment for Autism         99203         US         Bremow         0         0         \$50         \$50         \$50           Assessment for Autism         99203         US         Bremower         0         0         \$50         \$50         \$50           New Patient Evaluation and Management         99204         Escounter         0         0         \$50         \$50         \$50           New Patient Evaluation and Management         99204         Per Hour         0         0         \$50         \$50	Health Services		97804			0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99201   Per Hour   0   0   50   50   50   50	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Assessmen for Autism 99201 US Hour 0 0 0 50 50 50 80 New Patient Evaluation and Management 99202 US Hour 0 0 0 50 50 50 S0 New Patient Evaluation and Management 99203 US Hour 0 0 0 50 50 50 S0 New Patient Evaluation and Management 99203 US Encounter 0 0 0 50 50 50 S0 New Patient Evaluation and Management 99203 US Encounter 0 0 0 50 50 50 S0 New Patient Evaluation and Management 99203 US Encounter 0 0 0 50 50 S0 New Patient Evaluation and Management 99203 US Encounter 0 0 0 50 50 S0 New Patient Evaluation and Management 99204 US Encounter 0 0 0 50 50 S0 New Patient Evaluation and Management 99204 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99204 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 50 50 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 50 50 S0 S0 S0 New Patient Evaluation and Management 99205 US Per Hour 0 0 50 50 S0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99202	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99202 US Hour 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99203   U5   Encounter   0   0   50   50   50   50   50   50	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Aurism   99203	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Abose: New Patient Evaluation and Management   99203   Encounter   0   0   S0   S0   S0   S0   S0   S0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99204   U5   Per Hour   0   0   S0   S0   S0   S0	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management         99204         Per Hour         0         0         SO         SO         SO           New Patient Evaluation and Management         99205         Hour         0         0         SO         SO         SO           Assessment for Autism         99205         U5         Per Hour         0         0         SO         SO         SO           Substance Abuse: New Patient Evaluation and Management         99205         Hour         0         0         SO         SO         SO           Established Patient Evaluation and Management         99211         Per Hour         0         0         SO         SO         SO           Assessment for Autism         99211         U5         Encounter         0         0         SO         SO         SO           Established Patient Evaluation and Management         99212         U5         Encounter         7         13         S1,104         S158         S85           Assessment for Autism         99213         U5         Encounter         21         30         S5,267         S251         S176           Assessment for Autism         99213         U5         Encounter         0         0         S0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99205   U5   Per Hour   0   0   50   50   50   50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99211   U5   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism         99211         U5         Encounter         0         0         50         50         50           Established Patient Evaluation and Management         99212         U5         Encounter         7         13         \$1,104         \$158         \$85           Assessment for Autism         99212         U5         Encounter         0         0         \$0         \$0         \$0         \$0           Established Patient Evaluation and Management         99213         U5         Encounter         0         0         \$5,267         \$251         \$176           Assessment for Autism         99213         U5         Encounter         0         0         \$0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99212         Encounter         7         13         \$1,104         \$158         \$85           Assessment for Autism         99212         U5         Encounter         0         0         \$0 <t< td=""><td>Established Patient Evaluation and Management</td><td></td><td>99211</td><td></td><td>Per Hour</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism         99212         U5         Encounter         0         0         \$0         \$0         \$0           Established Patient Evaluation and Management         99213         U5         Encounter         21         30         \$55,267         \$251         \$176           Assessment for Autism         99213         U5         Encounter         0         0         \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99213         Encounter         21         30         \$5,267         \$251         \$176           Assessment for Autism         99213         U5         Encounter         0         0         \$0	Established Patient Evaluation and Management		99212		Encounter	7	13	\$1,104	\$158	\$85	2
Assessment for Autism         99213         U5         Encounter         0         0         \$0         \$0         \$0         \$0           Established Patient Evaluation and Management         99214         U5         15 Minutes         0         0         \$0 <td>Assessment for Autism</td> <td></td> <td>99212</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99214         15 Minutes         134         223         \$56,123         \$419         \$252           Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99213		Encounter	21	30	\$5,267	\$251	\$176	1
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,501         \$441         \$41         \$1,501         \$441         \$41         \$2,502         \$2,50	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         207         705         \$310,797         \$1,501         \$441           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99214		15 Minutes	134	223	\$56,123	\$419	\$252	2
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0           Additional Codes-Physician Services         99221         15 Minutes         41         47         \$4,355         \$106         \$93           Additional Codes-Physician Services         99222         15 Minutes         11         11         \$1,052         \$96         \$96           Additional Codes-Physician Services         99223         Encounter         9         9         \$860         \$96         \$96           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0         \$0         \$0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         41         47         \$4,355         \$106         \$93           Additional Codes-Physician Services         99222         15 Minutes         11         11         \$1,052         \$96         \$96           Additional Codes-Physician Services         99223         Encounter         9         9         \$860         \$96         \$96           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0         \$0         \$0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	207	705	\$310,797	\$1,501	\$441	3
Additional Codes-Physician Services         99222         15 Minutes         11         11         \$1,052         \$96         \$96           Additional Codes-Physician Services         99223         Encounter         9         9         \$860         \$96         \$96           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0         \$0         \$0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         9         9         \$860         \$96         \$96           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0         \$0         \$0         \$0	Additional Codes-Physician Services		99221		15 Minutes	41	47	\$4,355	\$106	\$93	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0         \$0         \$0         \$0	Additional Codes-Physician Services		99222		15 Minutes	11	11	\$1,052	\$96	\$96	1
	Additional Codes-Physician Services		99223		Encounter	9	9	\$860	\$96	\$96	1
Additional Codes-Physician Services 99225 15 Minutes 0 0 \$0 \$0 \$0	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
7	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$0         \$0         \$0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         57         202         \$17,225         \$302         \$85	Additional Codes-Physician Services		99231		15 Minutes	57	202	\$17,225	\$302	\$85	4
Additional Codes-Physician Services         99232         15 Minutes         25         37         \$3,343         \$134         \$90	Additional Codes-Physician Services		99232		15 Minutes	25	37	\$3,343	\$134	\$90	1
Additional Codes-Physician Services         99233         15 Minutes         39         64         \$5,896         \$151         \$92	Additional Codes-Physician Services		99233		15 Minutes	39	64	\$5,896	\$151	\$92	2
Assessment 99324 15 Minutes 0 0 \$0 \$0 \$0 \$0	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0	Assessment		99325	-	15 Minutes	0	0	\$0	\$0	\$0	0

Kalamazoo				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Kalamazoo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	2	106	\$681	\$341	\$6	53
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	32	33	\$3,281	\$103	\$99	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	1	3	\$972	\$972	\$324	3
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	307	504	\$98,680	\$321	\$196	2
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	136	319	\$29,923	\$220	\$94	2
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	151	304	\$62,256	\$412	\$205	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	305	29,259	\$1,542,388	\$5,057	\$53	96
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	3	\$144	\$144	\$48	3
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# onal Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Kalamazoo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	1	45	\$996	\$996	\$22	45
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	60	1,125	\$243,788	\$4,063	\$217	19
Peer Directed and Operated Support Services		H0046		Encounter	209	13,766	\$312,531	\$1,495	\$23	66
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	376	4,846	\$112,951	\$300	\$23	13
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	8	1,497	\$5,677	\$710	\$4	187
Community Living Supports (15 Minutes)		H2015		Encounter	121	33,840	\$652,866	\$5,396	\$19	280
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	18	1,169	\$27,229	\$1,513	\$23	65
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	141	5,715	\$331,180	\$2,349	\$58	41
Wraparound (SED Waiver)		H2022		Per one-way trip	28	74	\$57,414	\$2,051	\$776	3
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	3	17	\$1,689	\$563	\$99	6
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	41	924	\$74,731	\$1,823	\$81	23
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Kalamazoo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	1	3	\$79	\$79	\$26	3
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	1	2	\$53	\$53	\$27	2
Respite Care		T1005		Encounter	3	3,431	\$9,802	\$3,267	\$3	1,144
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	5	124	\$5,076	\$1,015	\$41	25
Targeted Case Management		T1017		Per Diem	129	3,204	\$102,534	\$795	\$32	25
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	16	18	\$6,043	\$378	\$336	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

ALL

### Children with Serious Emotional Disturbance

### Kalamazoo Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0 T2003 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation Hour 0 Transportation T2004 Per Diem 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2004 15 Minutes 0 0 \$0 \$0 \$0 0 Transportation T2005 Encounter Face-to-Face, 0 0 \$0 \$0 \$0 0 generally less than 10 minutes Substance Abuse Services: Transportation T2005 Per Mile 0 0 \$0 \$0 \$0 0 T2024 0 0 \$0 \$0 \$0 0 Prevention Services - Direct Model 15 Minutes T2025 \$0 Fiscal Intermediary Services 15 Minutes 0 0 \$0 \$0 0 Enhanced Medical Equipment-Supplies T2028 0 0 \$0 \$0 \$0 0 Encounter T2029 0 \$0 \$0 Enhanced Medical Equipment-Supplies Encounter 0 \$0 0 Crisis Intervention T2034 Encounter 0 0 \$0 \$0 \$0 0 Respite Care 0 T2036 Encounter 0 \$0 \$0 \$0 0 T2037 0 0 \$0 \$0 \$0 0 Respite Care Days 0 \$0 T2038 0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies T2039 15 Minutes 0 0 \$0 \$0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 0 \$0 Pharmacy (Drugs and Other Biologicals) Encounter 0 0 \$0 \$0 0 Other 0 0 \$0 \$0 \$0 Month 0 Aggregate for 'J' Codes

Service

0

1,254

0

\$0

\$4,890,421

\$0

\$0

0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

**Total Population and Cost** 

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	312	\$97,047	\$48,524	\$311	156
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	15	140	\$91,609	\$6,107	\$654	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	47	\$30,754	\$7,689	\$654	12
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	2	8	\$2,000	\$1,000	\$250	4
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	18	19	\$2,238	\$124	\$118	1

### **CMHSP Cost Data by Service Category** State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer Service Cotegory	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code									
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			5	5	\$1,863	\$373	\$373	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	51	51	\$20,211	\$396	\$396	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	49	98	\$5,524	\$113	\$56	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	114	629	\$66,967	\$587	\$106	6
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	12	32	\$4,600	\$383	\$144	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	4	4	\$327	\$82	\$82	1
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	42	79	\$5,871	\$140	\$74	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	121	556	\$45,117	\$373	\$81	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	18	101	\$6,997	\$389	\$69	6
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Children with Serious Emotional Disturbance

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	4	\$2,708	\$2,708	\$677	4
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$653	\$653	\$653	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$36	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	1	1	\$166	\$166	\$166	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	47	71	\$4,435	\$94	\$62	2
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	92	185	\$17,619	\$192	\$95	2
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	103	279	\$40,857	\$397	\$146	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	62	95	\$22,747	\$367	\$239	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	15	17	\$6,518	\$435	\$383	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Name	Lapeer				Unit						
Description   1932   15 minutes   0   0   91   30   92   0   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Secondary (Secondary	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment   9972	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Authorn	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
December   1912   December   0   0   50   50   50   50   50   50	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authan   92128   U5	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austral	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian   99334   U.S.   Escounter   0	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authum 99335 US PROCUMENTE 0 0 0 30 S0 S0 S0 0 0 Assessment for Authum 99336 US Executative 0 0 0 30 S0 S0 S0 S0 0 0 Assessment for Authum 99337 US Executative 0 0 0 50 S0 S0 S0 S0 S0 0 0 Assessment for Authum 99341 US Executative 0 0 0 S0 S0 S0 S0 S0 S0 0 Assessment for Authum 99341 US Executative 0 0 0 S0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99341 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99341 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99341 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99342 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99343 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99344 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99345 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99345 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99347 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99347 Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99348 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99349 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 0 S0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 0 S0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 0 S0 S0 S0 S0 S0 S0 S0 S0 S0 C0 Assessment for Authum 99340 US Executative 0 0 S0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authin	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authan  98377   Excounter  0 0 0 \$10 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99337 U5 Fincounter 0 0 0 50 50 50 50 0 Assessment for Authism 99337 U5 Fincounter 0 0 0 50 50 50 50 0 Assessment for Authism 99341 U5 Fincounter 0 0 0 50 50 50 50 0 Assessment for Authism 99342 E5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9942 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9943 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 E5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 E5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9944 U5 Fincounter 0 0 0 50 50 50 50 0 Assessment for Authism 9947 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9947 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9948 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9948 U5 Fincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9949 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9949 U5 7incounter 0 0 0 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9940 U5 7incounter 0 0 0 50 50	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9341 US Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism Assessment for Autism Assessment for Autism 49345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism Assessment for Autism 49345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9349 US Benounter 0 0 0 50 50 50 50 0 Assessment for Autism 9349 US Shanuars 0 0 0 50 50 50 50 0 Assessment for Autism 9340 US Shanuars 0 0 0 50 50 50 50 0 Assessment for Autism 40000 US Shanuars 0 0 0 50 50 50 50 0 Assessment for Autism 40000 US Shanuars 0 0 0 50 50 50 50 0 Assessment for Autism 40000 US Shanuars 0 0 0 50 50 50 50 0 Assessment for Autism 40000 US Shanuars 0 0 0 50 50 50 50 0 Transportation 40000 US Shanuars 0 0 0 50 50 50 50 0 Transportation 40000 US Shanuars 0 0 0 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 50 0 Transportation 40100 US Shanuars 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0  Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0  Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0  Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 0  Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 50 0  Assessment for Autism 99340 Encounter 0 0 0 50 50 50 50 50 0  Assessment for Autis	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 0 0 50 50 50 50 0 0 0 0 50 5	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99346 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Medication Administration 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Medication Management 99065 15 Minutes 0 0 0 50 50 50 50 0 Medication Management A0000 35 Minutes 0 0 0 50 50 50 50 0 Transportation A0080 15 Minutes 0 0 0 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment Autism 9343 U5 Encounter 0 0 50 S0 S0 S0 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 S0 S0 S0 0 0 Assessment of Autism 9344 U5 Encounter 0 0 0 50 S0 S0 S0 0 0 Assessment of Autism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment of Autism 9345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 9345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 9347 U5 Encounter 0 0 S0	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment 99344 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99345 U5 Encounter 0 0 S0	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 0 0 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 SO SO SO SO O O Assessment for Autism 99345 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99345 U5 Encounter 0 0 0 SO SO SO SO O O O O SO SO SO SO O O O	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   50   50   50   50   0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99347   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         0           Medication Management         99605         35 Minutes         0         0         \$0 <th< td=""><td>Assessment for Autism</td><td></td><td>99349</td><td>U5</td><td>30 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100	-	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Transportation		A0110	-	Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

## rbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	167	178	\$33,857	\$203	\$190	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	74	93	\$11,069	\$150	\$119	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	56	80	\$8,260	\$148	\$103	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	19	1,743	\$190,838	\$10,044	\$109	92
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	13	25	\$944	\$73	\$38	2
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	10	260	\$994	\$99	\$4	26
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client	-	S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	9	38	\$4,154	\$462	\$109	4
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
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## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			3	252	\$5,839	\$1,946	\$23	84
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	124	266	\$11,392	\$92	\$43	2
Respite Care		T1005		Encounter	7	678	\$2,141	\$306	\$3	97
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	86	5,287	\$326,049	\$3,791	\$62	61
Targeted Case Management		T1017		Per Diem	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		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	46	52	\$5,026	\$109	\$97	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lapeer				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	39	188	\$17,541	\$450	\$93	5
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					276		\$1,184,278			

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nildren with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 2014
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Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	14	113	\$81,549	\$5,825	\$722	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	10	47	\$30,645	\$3,065	\$652	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

## otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Assessment for Autism  Mental Health: Outpatient Care  Substance abuse: Outpatient Care 0900, 0906, 0915, 0916	90785 90791 90791 90792 90792 90832 0914, 90832	Modifier U5 U5 U5	Unit Measure Per Screen  Encounter Encounter Encounter	Cases  0 0 0 118	Units 0 0 0 119	\$0 \$0 \$0 \$0 \$42,720	\$0 \$0 \$0	\$0 \$0 \$0	Unit/Case  0 0 0
Assessment Assessment for Autism Assessment Assessment Assessment for Autism Mental Health: Outpatient Care Substance abuse: Outpatient Care 0900, 0906	90791 90791 90792 90792 90832 0914, 90832 0919	U5	Encounter Encounter	0 0 118	0 0 119	\$0 \$0	\$0 \$0	\$0	0
Assessment for Autism Assessment Assessment for Autism Mental Health: Outpatient Care Substance abuse: Outpatient Care 0900, 0906	90791 90792 90792 90832 0914, 90832 0919		Encounter	0 118	0 119	\$0	\$0		
Assessment Assessment for Autism Mental Health: Outpatient Care Substance abuse: Outpatient Care 0900, 0906.	90792 90792 90832 0914, 90832 0919		Encounter	118	119	*		\$0	0
Assessment for Autism  Mental Health: Outpatient Care  Substance abuse: Outpatient Care 0900, 0906.	90792 90832 0914, 90832 0919	U5	Encounter			\$42,720			U
Mental Health: Outpatient Care  Substance abuse: Outpatient Care 0900, 0906.	90832 0914, 90832 0919	U5		0			\$362	\$359	1
Substance abuse: Outpatient Care 0900, 0906.	0914, 90832 0919		Encounter		0	\$0	\$0	\$0	0
	0919			1	1	\$211	\$211	\$211	1
0715, 0710	90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment			Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care	90834		Encounter	17	112	\$7,589	\$446	\$68	7
Substance abuse: Outpatient Care         0900, 0906           0915, 0916			Encounter	0	0	\$0	\$0	\$0	0
Assessment	90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism	90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care	90837		Encounter 20-30 Min	4	14	\$6,148	\$1,537	\$439	4
Substance abuse: Outpatient Care	90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment	90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism	90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes	90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	90846		Encounter 75-80 Min	31	116	\$40,419	\$1,304	\$348	4
Substance Abuse: Outpatient Treatment 0900, 0906 0915, 0916.			Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	90847		Encounter 75-80 Min	35	520	\$219,513	\$6,272	\$422	15
Substance Abuse: Outpatient Treatment 0900, 0906 0915, 0916			Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	90849		Encounter 20-30 Min	4	36	\$21,019	\$5,255	\$584	9
Therapy-Family Therapy	90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment 0900, 0906 0915, 0916.			Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy	90853		Encounter 20-30 Min	2	2	\$1,170	\$585	\$585	1
Substance Abuse: Outpatient Treatment 0900, 0906 0915, 0916.			Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)	90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician 0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other	90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)	92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

## s Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Perfect Aleganger   Perfect   Perf	Lenawee				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Laurage Theory	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
New State   Secretary   9500   New State   Secretary   9500   Psychological Feeting PSYCHEPIYS   9501   Encoursed F5-09 Min   4   30   33,898   957   538   30   0   Psychological Feeting PSYCHEPIYS   9501   US   Encoursed F5-09 Min   4   30   33,898   957   538   30   0   Psychological Feeting PSYCHEPIYS   9501   US   Encoursed F5-09 Min   0   0   350   350   30   0   Psychological Feeting Psy Technican   95002   Davis PSYCHEPIYS   0   0   350   350   30   0   Psychological Feeting Psy Technican   95002   Davis PSYCHEPIYS   0   0   0   350   350   30   0   Psychological Feeting Psy Technican   95002   Davis PSYCHEPIYS   0   0   0   0   0   0   0   0   0	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Texture PXYCHPYNS	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Advancer for Antains	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technosian	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	4	30	\$3,898	\$975	\$130	8
Accounted the Authors   95102   US   50 Minutes   0   0   50   50   50   50   0   0	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Minutes 0 0 30 50 50 50 0 0 Assessment-Other 96110 30 Minutes 0 0 0 50 50 50 50 0 0 Norther-Other 96111 4 Minutes 0 0 0 50 50 50 50 0 0 Norther-Other 96111 4 Minutes 0 0 0 50 50 50 50 50 0 Norther-Other 96118 4 Minutes 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment-Other 96110 30 Minutes 0 0 50 50 50 50 50 0 0 Assessment-Other 96111 4.5 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96116 4.4 Minutes 0 0 0 50 50 50 50 50 0 Neuroposit and Esum 96116 4.4 Minutes 0 0 0 0 50 50 50 50 50 0 Neuroposit and Esum 96118 4.5 Minutes 0 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96118 U5 4.5 Minutes 0 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96118 U5 4.5 Minutes 0 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Esum 96119 U5 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuroposit and Physical Therapy 97110 Esum 96119 U5 60 0 0 50 50 50 50 50 0 0 Neuropositical of Physical Therapy 97110 Esum 96119 U5 60 0 0 50 50 50 50 50 0 0 Neuropositical of Physical Therapy 97150 Esum 96119 U5 60 0 0 50 50 50 50 50 0 0 Neuropositical of Physical Therapy 97150 Esum 96119 U5 60 0 0 50 50 50 50 50 0 Neuropositical of Physical Therapy 97150 Esum 96119 U5 60 0 0 0 50 50 50 50 50 0 Ne	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Nemophysical Stans Exam	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teal by PsychPhys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Auttsim   96118   U5   45 Minutes   0   0   50   50   50   50   0     Neuropsych test by Tech   96119   U5   60 Minutes   0   0   0   50   50   50   0     Neuropsych test Auttsim   96119   U5   60 Minutes   0   0   0   50   50   50   0     Neuropsych test Admin w Comp   96120   60 Minutes   0   0   50   50   50   50   0     Medication Administration   96572   60 Minutes   0   0   50   50   50   50   0     Medication Administration   96572   60 Minutes   0   0   50   50   50   50   0     Physical Therapy   97001   First 3074 Min.   0   0   50   50   50   50   0     Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   0     Occupational Thurapy   97003   Eacounter   0   0   50   50   50   50   0     Occupational Thurapy   97004   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97110   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97112   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97124   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97140   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97150   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97150   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97530   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97531   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97532   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97535   Eacounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97542   Eacounter   0   0   50   50   50   50   50     Occupational Or Physical Therapy   97555   Eacounter   0   0   50   50   50   50   50     Occupational Or Physical Therapy   97555   Eacounter   0   0	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech   96119   60 Minutes   0   0   50   50   50   50   0	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Administration   96119   U5 60 Minutes   0   0   50   50   50   50   0     Neuropsychiest Administration   96372   60 Minutes   0   0   50   50   50   50   0     Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   50     Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   50     Physical Therapy   97003   Encounter   0   0   50   50   50   50   50     Occupational Therapy   97004   Encounter   0   0   50   50   50   50   50     Occupational Therapy   97004   Encounter   0   0   50   50   50   50   50     Occupational Physical Therapy   97110   Encounter   0   0   50   50   50   50   50     Occupational Or Physical Therapy   97112   Encounter   0   0   50   50   50   50   50     Occupational Or Physical Therapy   97113   Encounter   0   0   50   50   50   50   50     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   97140   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   97150   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   97150   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9754   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9754   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9754   Encounter   0   0   50   50   50   50     Occupational Or Physical	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Administration   96120   60 Minutes   0   0   50   50   50   50   0	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0   0   1   1   1   1   1   1   1	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   0	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Name	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Decupational Therapy   97044   Encounter   0   0   S0   S0   S0   S0   S0   O	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97113         Encounter         0         0         S0	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97124         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         <	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97150         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97530         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97532         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97533         Encounter         0         0         SO	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	1	1	\$97	\$97	\$97	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	93	175	\$13,444	\$145	\$77	2
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	196	573	\$74,670	\$381	\$130	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	71	106	\$19,969	\$281	\$188	1
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	8	8	\$2,264	\$283	\$283	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$75	\$75	\$75	1
Additional Codes-Physician Services		99223		Encounter	1	1	\$126	\$126	\$126	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	1	4	\$180	\$180	\$45	4
Additional Codes-Physician Services		99233		15 Minutes	2	6	\$270	\$135	\$45	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	230	254	\$81,396	\$354	\$320	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	28	32	\$4,607	\$165	\$144	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	32	147	\$10,706	\$335	\$73	5
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	62	7,674	\$200,158	\$3,228	\$26	124
Home Based Services		H0036	ST	Encounter	1	78	\$8,174	\$8,174	\$105	78
Peer Directed and Operated Support Services		H0038		Encounter	1	6	\$356	\$356	\$59	6
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Part   Part	Lenawee				Unit						
Communicy Variety Supprove in Independent Principle on Nome   18043   180-0000   180-0000   180-0000   180-0000   180-0000   180-000000   180-00000   180-00000   180-000000   180-000000   180-00000000000000000000000000000000000	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Expert   MOMS	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Proc. Process Services   1988   Processory   0   0   0   0   0   0   0   0   0	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuser Laboratory	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Farement Plan Review   110000   150	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Published Flammer Plan Review   12000	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehinolizar Transmer Plan Reviews - Monitoring Activities   H3500   TS   Encounter   0   0   50   30   30   30   30   30	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Description in Mission Services - EBP only   19310   Encounter   0   0   50   50   50   0   0   0   0	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Criss Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Scale-Building and Ort of Home Non Vicutional Habilitation   H2014   Encounter   0   0   80   50   80   0   0   0   0   0   0   0   0	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	52	169	\$20,039	\$385	\$119	3
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	35	22,471	\$58,794	\$1,680	\$3	642
Delawin Surperes (Duly)   H2016   TG   Per mile   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Part   Intensive Behavioral Intervention (EliB1)	Behavior Services		H2019		Per mile	2	45	\$655	\$328	\$15	23
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound		H2021		Per one-way trip	7	101	\$82,781	\$11,826	\$820	14
Manual Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Praining - EBP   Encounter Session at least 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Praining - EBP   Encounter Session at least 40   Do	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0905, 0916, 0919   H2036   Encounter Session at least 45 min   1   1   898   898   898   1   1   1   1   1   1   1   1   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         1         \$98         \$98         \$98         \$1           Transportation         \$0209         Encounter         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Care</td><td></td><td>H2035</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	1	\$98	\$98	\$98	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$20         \$20         \$8           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         1         8         \$160         \$160         \$20         8           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	1	8	\$160	\$160	\$20	8
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			1	40	\$4,048	\$4,048	\$101	40
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	203	386	\$38,021	\$187	\$99	2
Respite Care		T1005		Encounter	4	1,596	\$6,021	\$1,505	\$4	399
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	73	209	\$23,985	\$329	\$115	3
Targeted Case Management		T1017		Per Diem	128	524	\$52,390	\$409	\$100	4
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	2	6	\$543	\$272	\$91	3
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	48	58	\$16,118	\$336	\$278	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	·	T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

383

\$1,175,027

**Total Population and Cost** 

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	151	\$40,317	\$20,159	\$267	76
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	51	484	\$320,326	\$6,281	\$662	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	9	65	\$46,090	\$5,121	\$709	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Service (Agency   Service (A	Lifeways				Unit						
Secons	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mescale and Markins	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Seconate   907g   150	Assessment		90791			10	9	\$8,212	\$821	\$912	1
Manus Hatalik Depaired Each   9070;   9070;   150   160   150	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	138	136	\$140,399	\$1,017	\$1,032	1
Secondary   1900, 1900, 1901, 1901   1902   1903   1903   1904   1904   1905	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Passer   P	Mental Health: Outpatient Care		90832		Encounter	59	149	\$8,226	\$139	\$55	3
Meerial Fronting   9083   15   Encounter   24   1,016   S10,32   S60   S90   90   90   90   90   90   90	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Computient Care	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Subtance above: Outputent Care   \$900, 900, 5014, 6916, 99	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mercal Leafth Cupratient Care   9856   15   Excounter 20-30 Mine   0   0   0   0   0   0   0   0   0	Mental Health: Outpatient Care		90834		Encounter	244	1,616	\$161,382	\$661	\$100	7
Assessment for Authin	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Menial Health: Outpatient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abose: Organizer Cere	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment of Authins	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	57	268	\$28,540	\$501	\$106	5
Assessment for Autism	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pychotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   0   0   S0   S0   S0   S0   S0   S0	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90846         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90847         Encounter 75-80 Min         4         13         \$1,350         \$338         \$104         3           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 20-30 Min         0         0         \$50         \$50         \$50         \$60	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 75-80 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90846</td><td></td><td>Encounter 75-80 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90849   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90847		Encounter 75-80 Min	4	13	\$1,350	\$338	\$104	3
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   0   0   0   80   80   80   80   0   80	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 </td <td>Substance Abuse: Outpatient Treatment</td> <td></td> <td>90849</td> <td></td> <td>Encounter 20-30 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   80   80   80   80   0   0   0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         50         50         50         50         0           Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         50         50         50         0           Assessments-Other         90887         Encounter 75-80 Min         161         161         \$13,311         \$83         \$83         1           Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0         <	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         161         161         161         \$13,311         \$83         \$83         1           Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$151         \$151         \$38         \$4           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         1         4         \$151         \$151         \$38         4           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0 <t< td=""><td>Assessments-Other</td><td></td><td>90887</td><td></td><td>Encounter 75-80 Min</td><td>161</td><td>161</td><td>\$13,311</td><td>\$83</td><td>\$83</td><td>1</td></t<>	Assessments-Other		90887		Encounter 75-80 Min	161	161	\$13,311	\$83	\$83	1
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	1	4	\$151	\$151	\$38	4
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	1	1	\$110	\$110	\$110	1
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	12	\$1,138	\$1,138	\$95	12
Assessment for Autism		96101	U5	Encounter 75-80 Min	1	6	\$569	\$569	\$95	6
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$44	\$44	\$44	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	1	4	\$68	\$68	\$17	4
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	17	72	\$2,388	\$140	\$33	4
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	58	78	\$14,059	\$242	\$180	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	265	791	\$203,338	\$767	\$257	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	144	262	\$116,897	\$812	\$446	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	12	13	\$9,744	\$812	\$750	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	1	1	\$38	\$38	\$38	1
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
<del></del>										

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processor   Proc	Lifeways				Unit						
Account   Acco	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Accounter fix Authors	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors 9327   15 Minares 0 0 0 50 50 50 0 Assessment for Authors 9328   Processor 0 0 0 50 50 50 0 Assessment for Authors 9328   Processor 0 0 0 50 50 50 0 Assessment for Authors 9324   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9324   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9325   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9327   Processor 0 0 0 50 50 50 50 50 0 Assessment for Authors 9327   Processor 0 0 0 50 50 50 50 50 0 Assessment for Authors 9327   Processor 0 0 0 50 50 50 50 50 0 Assessment for Authors 9327   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9327   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9321   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9332   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9334   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9335   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Assessment for Authors 9336   Processor 0 0 0 50 50 50 50 0 Asses	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
According to American   9272   US   30 Minutes   0   0   59   50   50   0   0   0   0   0   50   5	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for faritisms 9932   Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 9932   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 9931   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 9933   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 9933   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 9933   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 99337   U5 Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for faritisms 99337   U5 Excounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for faritisms 99337   U5 Excounter 0 0 0 50 50 50 50 50 0 0 0 0 0 0 0 0 0	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Ansimm	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austrian  Assessment for Austri	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Accessment for Authors	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn Assessment for Farithmin Assessment for Farithmi	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audition 99335 U.S Executare 0 0 0 50 50 50 50 50 0 0 Assessment For Audition 9936 U.S Executare 0 0 0 50 50 50 50 0 0 Assessment For Audition 99377 Executare 0 0 0 50 50 50 50 0 0 Assessment For Audition 99377 U.S Executare 0 0 0 50 50 50 50 0 0 0 Assessment For Audition 99377 U.S Executare 0 0 0 50 50 50 50 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Assessment for Aurism   Assessment   Asses	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Antism	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99341 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99343 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99346 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Benounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Benounter 0 0 0 80 80 80 80 0 Assessment for Autism 99340 U5 30 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99360 U5 80 80 80 80 80 80 80 80 80 80 80 80 80	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism         99342         Encounter         0         0         \$0	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99342   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   50   50   50   50   0	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assesment for Autism         99343         U.5         Encounter         0         0         \$0	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   S0   S0   S0   S0   O	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99344         U5         Encounter         0         0         50         50         50         0           Assessment         99345         Encounter         0         0         50         50         50         0           Assessment for Autism         99345         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99348         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         Encounter         0         0         50         50         50         0           Assessment for Autism         99345         U5         Encounter         0         0         50         50         50         0           Assessment         99347         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         Bnounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment or Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism<	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Medication Administration         99506         15 Minutes         0         0         SO         SO         SO         SO         O           Transportation         A0090         15 Minutes         0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	1	116	\$492	\$492	\$4	116
Additional Codes-Transportation		A0427		Encounter	1	1	\$114	\$114	\$114	1
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	434	447	\$95,102	\$219	\$213	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	26	277	\$20,753	\$798	\$75	11
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	492	510	\$200,393	\$407	\$393	1
Assessment for Autism		H0031	U5	Encounter	1	2	\$1,703	\$1,703	\$852	2
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	303	597	\$40,557	\$134	\$68	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	387	41,708	\$2,674,695	\$6,911	\$64	108
Home Based Services		H0036	ST	Encounter	72	6,422	\$378,954	\$5,263	\$59	89
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Perfect Perf	Lifeways				Unit						
Communic Frience Suppose in Indepose Name   18003   18000   19000	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Regime	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Per Description of Operand Suppose   98106   9820   90   90   90   90   90   90   90	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Spinstance Abuser Laberatory	Respite		H0045		Encounter	1	2	\$526	\$526	\$263	2
Destator   Destator	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pachas   Path   Pachas   Pac	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Petersor Teamers Plan Review - Manitoring Activities   H2000   TS   Escounter   0   0   0   90   50   50   0   0   0   0   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Compendance Medication Services - ERP only	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Sail-Building and Out of Home Non Vocational Habilitation   H2014   Encounter   0   0   50   50   50   50   10	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Lising Supports (18 Minutes)	Crisis Intervention		H2011		Encounter	137	751	\$54,575	\$398	\$73	5
Community Lixing Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dulty)	Community Living Supports (15 Minutes)		H2015		Encounter	1	180	\$651	\$651	\$4	180
Permile   1800	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Permit   P	Community Living Supports (Daily)		H2016	TF	15 Minutes	5	632	\$190,087	\$38,017	\$301	126
Paglikat Behavioral Intervention (ABII).   H2019   U.S., TG   Per one-way trip   0   0   0   50   50   50   50   0   0	Community Living Supports (Daily)		H2016	TG	Per mile	3	672	\$222,968	\$74,323	\$332	224
Part   Memory   Part   Part	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Per one-way trip   0   0   50   50   50   50   50   50	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	211	\$1,526	\$0	\$7	0
Wingaround         H2021         Per one-way trip         28         1,649         \$68,328         \$2,40         \$41         \$59           Warparound (SED Waiver)         H2022         Per one-way trip         13         389         \$105,119         \$8,066         \$270         30           Warparound (SED Waiver)         H2022         TT         Per one-way trip         7         \$4         \$11,706         \$1,672         \$217         8           Supported Employment Services         H2023         Per one-way trip         0         0         \$0         \$50         \$50         \$0 <td>Early Intensive Behavioral Intervention (EIBI)</td> <td></td> <td>H2019</td> <td>U5, TG</td> <td>Per one-way trip</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	28	1,649	\$68,328	\$2,440	\$41	59
Numerical Employment Services   H2023   Per one-way trip   0   0   S0   S0   S0   S0   S0   S0	Wraparound (SED Waiver)		H2022		Per one-way trip	13	389	\$105,119	\$8,086	\$270	30
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	7	54	\$11,706	\$1,672	\$217	8
Substance Abuse Services: Outpatient Care         0900, 0914, 0915, 0916, 0919         H2027         Per Mile         0         0         S0         \$0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Substance Abuse: Outpatient Care   0900, 0906, 0914, 0919   H2036   Encounter Session at least 45 min   Substance Abuse: Outpatient Care   M0064   Encounter   135   285   \$56,304   \$417   \$198   2   Transportation   S0209   Encounter   0   0   50   \$0   \$0   \$0   \$0   \$0	Home Based Services		H2033		Items	98	9,847	\$455,563	\$4,649	\$46	100
Medication Review         M0064         Encounter         135         285         \$56,304         \$417         \$198         2           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	135	285	\$56,304	\$417	\$198	2
Substance Abuse Services: Transportation         \$0215         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$1         \$2         \$2         \$2         \$3         \$3         \$65         \$2           Family Training         \$5111         HA         Days         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         1         16         \$499         \$499         \$31         16           Family Training - EBP         S5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$130         \$65         \$2           Family Training         \$5111         HA         Days         0         0         \$0 <t< td=""><td>Substance Abuse Services: Transportation</td><td></td><td>S0215</td><td></td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         1         2         \$130         \$130         \$65         2           Family Training         \$5111         HA         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	1	16	\$499	\$499	\$31	16
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	1	2	\$130	\$130	\$65	2
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	1	80	\$140	\$140	\$2	80
Respite		S5151		Encounter	4	47	\$3,803	\$951	\$81	12
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	15	47	\$4,611	\$307	\$98	3
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	3	3	\$376	\$125	\$125	1
Health Services		T1002		15 Minutes	1	1	\$50	\$50	\$50	1
Respite Care		T1005		Encounter	48	17,347	\$31,554	\$657	\$2	361
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	3	49	\$1,762	\$587	\$36	16
Targeted Case Management		T1017		Per Diem	9	199	\$8,010	\$890	\$40	22
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	1	1	\$201	\$201	\$201	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	7	12	\$397	\$57	\$33	2
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	10	16	\$6,229	\$623	\$389	2
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					1,257		\$5,754,574			

## Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Livingston				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	30	\$10,385	\$10,385	\$346	30
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	16	205	\$127,886	\$7,993	\$624	13
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	16	124	\$99,700	\$6,231	\$804	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0

Psychotherapy for Crisis Each Additional 30 Minutes	Livingston				Unit						
Memorane for Autom	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mesenset for Aubins	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Marciannes	Assessment		90791			4	4	\$1,600	\$400	\$400	1
Mean Health Chaptear Chr.   9072   905   Encounter   0   0   0   0   0   0   0   0   0	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Manial Relatic Congueires Care	Assessment		90792		Encounter	70	70	\$30,743	\$439	\$439	1
Properties Computing Circle   1960, 1960, 1971   1972	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mansemen   983	Mental Health: Outpatient Care		90832		Encounter	54	135	\$15,491	\$287	\$115	3
Mescaner for Austrian	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Halable Curpations Curv	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Sebtance above: Outputent Core   1993, 1994, 1995, 1995, 1995   1995, 1995, 1995   1995, 1995, 1995   1995, 1995, 1995   1995, 1995, 1995   1995, 1995, 1995   1995, 1995, 1995   1995,	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   9015,1679191   90836   1600unter 20.30 Min   0   0   0   0   0   0   0   0   0	Mental Health: Outpatient Care		90834		Encounter	86	270	\$47,348	\$551	\$175	3
Assessment for Austim	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Menial Health: Curposition Cure   9887   Encounter 20-30 Min   129   823   \$181,988   \$1,411   \$221   \$6   \$20   \$10	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	129	823	\$181,988	\$1,411	\$221	6
Assessment for Autism   9888	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pochotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Perapy-Family Therapy   9846   Encounter 75-80 Min   59   226   \$51,270   \$869   \$227   4	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         99846         Encounter 75:80 Min         0         0         S0         \$0 <t< td=""><td>Psychotherapy for Crisis Each Additional 30 Minutes</td><td></td><td>90840</td><td></td><td>Encounter 45-50 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Perapy-Family Therapy   9040, 0916, 0914   90847   Encounter 75-80 Min   172   806   \$190.70   \$1,100   \$237   \$5   \$10	Therapy-Family Therapy		90846		Encounter 75-80 Min	59	226	\$51,270	\$869	\$227	4
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         12         46         \$5.965         \$497         \$1.30         4           Therapy-Family Therapy         90849         HS         Encounter 20-30 Min         0         0         50         \$	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90849   Encounter 20-30 Min   12   46   \$5.965   \$497   \$130   48	Therapy-Family Therapy		90847		Encounter 75-80 Min	172	806	\$190,792	\$1,109	\$237	5
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   0   50   50   50   50   0   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>12</td><td>46</td><td>\$5,965</td><td>\$497</td><td>\$130</td><td>4</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	12	46	\$5,965	\$497	\$130	4
Therapy-Group Therapy   90853   Encounter 20-30 Min   0   0   0   80   80   80   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         50         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         50         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         1         1         1         \$91         \$91         \$91         1           Speech & Language Therapy         92507         Encounter 75-80 Min         4         94         \$6,888         \$1,722         \$73         24           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         4         94         \$6,888         \$1,722         \$73         24           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)	·	92506		Encounter 75-80 Min	1	1	\$91	\$91	\$91	1
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	4	94	\$6,888	\$1,722	\$73	24
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	3	4	\$341	\$114	\$85	1
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	7	22	\$3,395	\$485	\$154	3
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	8	8	\$289	\$36	\$36	1
Occupational Therapy		97004		Encounter	2	2	\$59	\$30	\$30	1
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	11	727	\$16,295	\$1,481	\$22	66
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0
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Livingston				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	1	1	\$110	\$110	\$110	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	13	15	\$2,270	\$175	\$151	1
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	111	270	\$56,385	\$508	\$209	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	86	213	\$49,461	\$575	\$232	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

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Account   Acco	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Accounter for Authors	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Avenument Authors 9927   15 Manures 0 0 0 90 90 90 90 0 Accounter Authors 9928   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9928   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9928   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9924   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9924   US Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9925   Executor 0 0 0 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 90 0 Accounter Authors 9926   Executor 0 0 0 90 90 90 90 90 90 90 90 90 90 90 9	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
According to Admin   9277   U5   30 Miners   0   0   50   50   50   50   0   0	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for factation 9923 US Executed 0 0 5 59 59 50 50 0 0 Accessment for factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 50 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9923 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50 50 50 0 0 Accessment For factation 9924 US Executed 0 0 0 59 50 50	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Antama	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austran 99334 U5 Excounter 0 0 0 93 93 93 95 00 0 Assessment for Austran 99335 Excounter 0 0 0 93 93 93 93 93 93 90 93 93 93 93 93 93 93 93 93 93 93 93 93	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurhins	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn  Assessment for Authorn  Assessment for Authorn  P3335 U5 Encounter  D4500 D	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audition 99335 U.S Executary 0 0 0 50 80 80 90 0 Assessment for Audition 99336 Executary 0 0 0 50 80 80 90 0 0 Assessment for Audition 99337 Executary 0 0 0 50 80 80 90 0 0 Assessment for Audition 99337 U.S Executary 0 0 0 50 80 80 80 0 0 Assessment for Audition 99337 U.S Executary 0 0 0 50 80 80 80 0 0 Assessment for Audition 99337 U.S Executary 0 0 0 50 80 80 80 0 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Assessment for Aurism   Sp3356   Eacounter   0   0   50   50   50   50   0	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Antism	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99341 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99342 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99343 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99344 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99345 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99346 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99347 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99348 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Encounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Benounter 0 0 0 80 80 80 80 0 Assessment for Autism 99349 U5 Benounter 0 0 0 80 80 80 80 0 Assessment for Autism 99340 U5 30 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99350 U5 70 Minutes 0 0 0 80 80 80 80 0 Assessment for Autism 99360 U5 80 80 80 80 80 80 80 80 80 80 80 80 80	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism         99342         Encounter         0         0         \$0	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99342   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   50   50   50   50   0	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assesment for Autism         99343         U.5         Encounter         0         0         SO         SO         SO         O           Assesment         99344         U.5         Encounter         0         0         SO         SO         SO         O           Assesment for Autism         99345         U.5         Encounter         0         0         SO         SO         SO         SO         O           Assesment for Autism         99345         U.5         Encounter         0         0         SO         SO         SO         SO         O         ASS         ASS         SO	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   S0   S0   S0   S0   O	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99344         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99345         Encounter         0         0         SO	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         Encounter         0         0         50         50         50         0           Assessment for Autism         99345         U5         Encounter         0         0         50         50         50         0           Assessment         99347         U5         Encounter         0         0         50         <	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99347         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O         Assessment SO         SO <td>Assessment for Autism</td> <td></td> <td>99344</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Medication Administration         99506         15 Minutes         0         0         SO         SO         SO         SO         O           Transportation         A0090         15 Minutes         0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

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Children with Serious Emotional Disturbance SUB-El	MENT COST REPORT: Fiscal Year 2014
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Serves Captury   Revenue   REVESS ON   Modes   Composition   Composition	Livingston				Unit						
Emperation	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Pampentation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Properties	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Milloand Cafes-Franceporation   Marcia   Paccounter   0   0   0   0   0   0   0   0   0	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Minimace Medical Engineers Supplies	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Pathone A Medical Equipment Signifies	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Easily Tamings Support LEW only   500   50   50   50   50   50   50	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Sebature Abus: Recovery Support Services	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Patiente Abus: Individual Assentment   1800    Ecounter   0   0   0   50   50   50   10   10	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Presenter   10002	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outputient Treatment	Assessment		H0002		Encounter	79	83	\$36,182	\$458	\$436	1
Subtance Abuse: Cutputient Treatment   6000,0061,6061,801   1000   Encounter   0   0   0   0   0   0   0   0   0	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management   1006	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   14001   14001   1500   150	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1090         H0015         Encounter         0         0         50         50         50         0           Crisis Residential Services         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0         0           Substance Abuse: Edvi Intervention         H0022         Encounter         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50         50	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abose: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         90         0           Substance Abose: Outpatient Care         0906         H0015         Encounter         0         0         50         50         50         0           Crisis Residential Services         H0018         Encounter         0         0         50         50         50         0           Substance Abose: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abose: Residential         1002         H0019         Encounter         0         0         50         50         50         50         0           Substance Abose: Residential         1002         H0029         Encounter         0         0         50         50         50         0         0           Substance Abose: Residential         H0022         Encounter         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50 <t< td=""><td>Substance Abuse: Sub-Acute Detoxification</td><td>1002</td><td>H0010</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0966   H0015   Encounter   0   0   50   50   50   50   0   0   0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services         H0018         Encounter         0         0         \$0	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential         1002         H0018         Encounter         0         0         50	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Methadone         H0020         Encounter         0         0         50         50         50         50         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         50         50         50         0           Per Directed and Operated Support Services         H0025         Encounter         0         0         50         50         50         0           Prevention Services - Direct Model         H0035         Encounter         0         0         50         50         50         0           Assessment         H0031         Encounter         0         0         50         50         50         0           Assessment for Autism         H0031         U5         Encounter         0         0         50         50         50         0           Assessment Hornarity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Teatment Hanning         H0032	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone         H0020         Encounter         0         0         \$0	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention         H0022         Encounter         0         0         \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Per Directed and Operated Support Services         H0023         Encounter         0         0         \$0	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         H0025         Encounter         0         0         \$0<	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         114         118         \$71,530         \$627         \$606         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$12         \$12	Assessment		H0031		Encounter	114	118	\$71,530	\$627	\$606	1
Treatment Planning         H0032         Encounter         9         12         \$1,461         \$162         \$122         \$1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         1         1         \$111         \$1	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         1         1         \$111	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	9	12	\$1,461	\$162	\$122	1
Health Services         H0034         Encounter         0         0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$111	\$111	\$111	1
Home Based Services         H0036         Encounter         132         16,020         \$801,432         \$6,071         \$50         121           Home Based Services         H0036         ST         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	132	16,020	\$801,432	\$6,071	\$50	121
	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 0 \$0 \$0 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
• • • • • • • • • • • • • • • • • • • •	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Livingston				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	3	10	\$996	\$332	\$100	3
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	13	38	\$3,092	\$238	\$81	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	2	839	\$12,519	\$6,260	\$15	420
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	69	3,510	\$332,689	\$4,822	\$95	51
Wraparound (SED Waiver)		H2022		Per one-way trip	6	104	\$36,227	\$6,038	\$348	17
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	2	43	\$1,359	\$680	\$32	22
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	28	190	\$24,084	\$860	\$127	7
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Livingston		wanaa a .	34.110	Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	149	563	\$72,975	\$490	\$130	4
Respite Care		T1005		Encounter	77	18,740	\$79,390	\$1,031	\$4	243
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	6	69	\$9,034	\$1,506	\$131	12
Targeted Case Management		T1017		Per Diem	26	318	\$18,998	\$731	\$60	12
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	25	36	\$14,787	\$591	\$411	1
Prevention Services - Direct Model		T1027		Days	6	548	\$27,395	\$4,566	\$50	91
Enhanced Medical Supplies or Pharmacy		T1999		Days	4	9	\$2,501	\$625	\$278	2
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001	-	15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Livingston				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	-	ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					380		\$2,445,515			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	246	\$63,468	\$15,867	\$258	62
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	372	2,989	\$1,874,963	\$5,040	\$627	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	2	10	\$7,926	\$3,963	\$793	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	413	2,870	\$831,145	\$2,012	\$290	7
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			291	332	\$45,274	\$156	\$136	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	220	234	\$52,810	\$240	\$226	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	137	365	\$50,655	\$370	\$139	3
	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	2	5	\$813	\$407	\$163	3
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	392	1,307	\$193,435	\$493	\$148	3
	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	1	1	\$201	\$201	\$201	1
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	267	1,118	\$247,314	\$926	\$221	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	5	8	\$2,050	\$410	\$256	2
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	3	3	\$585	\$195	\$195	1
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	1	1	\$73	\$73	\$73	1
Therapy-Family Therapy		90846		Encounter 75-80 Min	48	94	\$21,586	\$450	\$230	2
	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	653	3,140	\$342,774	\$525	\$109	5
	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	23	79	\$3,372	\$147	\$43	3
	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	1	1	\$94	\$94	\$94	1
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	3	51	\$5,344	\$1,781	\$105	17
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

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Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	2	2	\$383	\$192	\$192	1
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	8	10	\$2,037	\$255	\$204	1
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	1	3	\$64	\$64	\$21	3
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	9	10	\$1,540	\$171	\$154	1
Occupational Therapy		97004		Encounter	1	1	\$23	\$23	\$23	1
Occupational or Physical Therapy		97110		Encounter	1	349	\$10,728	\$10,728	\$31	349
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	11	1,086	\$34,532	\$3,139	\$32	99
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	8	145	\$2,182	\$273	\$15	18
Occupational or Physical Therapy		97535		Encounter	1	2	\$85	\$85	\$43	2
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code									
		HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	1	1	\$118	\$118	\$118	1
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	5	7	\$1,285	\$257	\$184	1
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	3	3	\$697	\$232	\$232	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	1	1	\$93	\$93	\$93	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	11	26	\$1,502	\$137	\$58	2
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	159	325	\$19,447	\$122	\$60	2
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	532	1,492	\$106,108	\$199	\$71	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	322	1,201	\$153,414	\$476	\$128	4
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	9	17	\$2,820	\$313	\$166	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	-	A0090	-	25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

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Properties   Pro	Macomb				Unit						
Temperatation	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Perspectation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Marchian	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Mallerand Code-Transportation	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Matternant Colors Transporations	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Pames   Fames   Fame	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Parally Training Support FIRP only	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Sebatasee Abase: Recovery Supporte Services	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Processes   Proc	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abous Laboratory   18000	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Cottpatient Treatment   1900, 1906, 1916, 1916, 1919   1900   1900, 1919, 1919   1900, 1919   1900, 1919, 1919   1900, 1919, 1919   1900, 1919, 1919, 1919   1900, 1919	Assessment		H0002		Encounter	9	10	\$2,165	\$241	\$217	1
Substance Abuse: Customarian   1915, 1916, 1919   1910, 19	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Each Management   1002   1001   1600   1600   1	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Subtance Abous: Sub-Acute Detoxification   1002   1100	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   1001	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acure Detoxification   1002   10014   Encounter   0   0   0   50   50   50   0   0   50	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0906   H0015   Encounter   0   0   50   50   50   0   0   0   0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services         H0018         Encounter         54         681         \$245,160         \$4,50         \$360         30           Substance Abuse: Residential         1002         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0020         Encounter         0         0         50         50         50         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         50         50         50         50         0           Peer Directed and Operated Support Services         H0023         Encounter         0         0         50         50         50         0         0           Peer Directed and Operated Support Services         H0030         Encounter         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50         0         0         50         50         50	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002   1001   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         0           Substance Abuse: Methadone         H0020         Encounter         0         0         50         50         50         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         50         50         50         0           Per Directed and Operated Support Services         H0023         Encounter         0         0         50         50         50         0           Prevention Services - Direct Model         H0030         Encounter         0         0         50         50         50         0           Crisis Intervention         H0031         Encounter         90         0         50         50         50         0           Assessment         H0031         U5         Encounter         90         1,63         \$185,228         \$197         \$114         2           Assessment for Autism         H0031         HW         Encounter         0         0         \$185,228         \$197         \$114         2           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031	Crisis Residential Services		H0018		Encounter	54	681	\$245,160	\$4,540	\$360	13
Substance Abuse: Methadone         H0020         Encounter         0         0         \$50         \$50         \$0         0           Substance Abuse: Early Intervention         H0022         Encounter         0         0         \$50         \$50         \$50         \$60	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention         H0022         Encounter         0         0         \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Per Directed and Operated Support Services   H0023   Encounter   0   0   50   50   50   50   0	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         H0025         Encounter         0         0         \$0<	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         50         50         50         20           Assessment         H0031         Encounter         940         1,630         \$185,228         \$197         \$114         2           Assessment for Autism         H0031         U5         Encounter         6         6         \$3,131         \$522         \$522         1           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0         <	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         940         1,630         \$185,228         \$197         \$114         2           Assessment for Autism         H0031         U5         Encounter         6         6         \$3,131         \$522         \$522         1           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Resessment for Autism   H0031   U5   Encounter   6   6   \$3,131   \$522   \$522   1	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$10	Assessment		H0031		Encounter	940	1,630	\$185,228	\$197	\$114	2
Treatment Planning         H0032         Encounter         752         1,110         \$154,465         \$205         \$139         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         338         563         \$552,472         \$155         \$93         2           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0 <t< td=""><td>Assessment for Autism</td><td></td><td>H0031</td><td>U5</td><td>Encounter</td><td>6</td><td>6</td><td>\$3,131</td><td>\$522</td><td>\$522</td><td>1</td></t<>	Assessment for Autism		H0031	U5	Encounter	6	6	\$3,131	\$522	\$522	1
Monitoring of Treatment - Clinician         H0032         TS         Encounter         338         563         \$52,472         \$155         \$93         2           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0         <	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$206         \$92         \$2         \$2         \$2         \$3,638         \$1,448,139         \$6,436         \$43         \$150         \$0 <td>Treatment Planning</td> <td></td> <td>H0032</td> <td></td> <td>Encounter</td> <td>752</td> <td>1,110</td> <td>\$154,465</td> <td>\$205</td> <td>\$139</td> <td>1</td>	Treatment Planning		H0032		Encounter	752	1,110	\$154,465	\$205	\$139	1
Health Services         H0034         Encounter         17         38         \$3,506         \$206         \$92         2           Home Based Services         H0036         Encounter         225         33,638         \$1,448,139         \$6,436         \$43         150           Home Based Services         H0036         ST         Encounter         0         0         \$0 <td>Monitoring of Treatment - Clinician</td> <td></td> <td>H0032</td> <td>TS</td> <td>Encounter</td> <td>338</td> <td>563</td> <td>\$52,472</td> <td>\$155</td> <td>\$93</td> <td>2</td>	Monitoring of Treatment - Clinician		H0032	TS	Encounter	338	563	\$52,472	\$155	\$93	2
Home Based Services         H0036         Encounter         225         33,638         \$1,448,139         \$6,436         \$43         \$15           Home Based Services         H0036         ST         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>17</td><td>38</td><td>\$3,506</td><td>\$206</td><td>\$92</td><td>2</td></t<>	Health Services		H0034		Encounter	17	38	\$3,506	\$206	\$92	2
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	225	33,638	\$1,448,139	\$6,436	\$43	150
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
1 11	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

New Note   New No.   New	Macomb				Unit						
Comment   Ling Suppers in independent imagenes beare   1003   50   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   100	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Personant of Expenses   1800	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laburatory   1004   1005   1000   1	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Pathware Abase: Charpairent Treatment   1986   1980   19	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pathwire	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Selberic Transmer Flux Retries - Montering Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptions Medication Services - ERP only	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Solit Floridation	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Salik-Building and Our of Home Non Vocational Habilitation   H2015   Encounter   0   0   80   50   80   10	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dialys)	Crisis Intervention		H2011		Encounter	15	58	\$4,155	\$277	\$72	4
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	142	244,452	\$1,235,022	\$8,697	\$5	1,721
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   0   0   0   50   50   50   10     Early Intensive Behavioral Intervention (EBIB)   H2019   U.5, TG   Per one-way trip   0   0   0   50   55,293   527,147   514   1.774     Citis Intervention   H2020   Per one-way trip   0   0   0   50   50   50   50   0     Weapuround (SED Waiver)   H2021   Per one-way trip   85   7,294   545,038   55,300   562   86     Weapuround (SED Waiver)   H2022   TT   Per one-way trip   0   0   50   55,710   5259   19     Weapuround (SED Waiver)   H2022   TT   Per one-way trip   0   0   50   50   50   50   0     Supported Employment Services   H2023   Per one-way trip   0   0   50   50   50   50   0     Menial Health Therapy   H2027   Per Male   0   0   50   50   50   50   0     Substance Abose Services: Outpatient Care   0000, 0014, 0015, 014, 0015   H2027   Per Male   0   0   50   50   50   50   0     Clubhouse Psychosocial Rehabilitation Programs   H2030   Refer to code descriptions   0   0   50   50   50   50   0     Substance Abose: Outpatient Care   0000, 0006, 0014, 1015   H2035   Encounter   0   0   0   50   50   50   50   0     Substance Abose: Outpatient Care   0000, 0006, 0014, 1015   H2035   Encounter   0   0   0   50   50   50   50   0     Substance Abose: Outpatient Care   0000, 0006, 0014, 1015   H2035   Encounter   0   0   0   50   50   50   50   0     Substance Abose: Outpatient Care   0000, 0006, 0014, 1015   H2035   Encounter   0   0   0   50   50   50   50   0     Transportation   50215   Encounter   1   6   5540   5540   5540   50   0     Transportation   50215   Encounter   0   0   0   50   50   50   50   50	Community Living Supports (Daily)		H2016	TG	Per mile	11	944	\$205,510	\$18,683	\$218	86
Early Intensive Behavioral Intervention (EIIBI)	Behavior Services		H2019		Per mile	1	3	\$206	\$206	\$69	3
Griss Intervention         H2020         Per ons-way trip         0         0         \$0         \$50         \$50         \$0           Wraparound         H2021         Per ons-way trip         85         7,294         \$450,538         \$55,00         \$62         86           Wraparound (SED Waiver)         H2022         Per one-way trip         32         612         \$182,735         \$55,710         \$299         19           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         50         \$50         \$0         0           Supported Employment Services         H2022         TT         Per one-way trip         0         0         \$50         \$0 </td <td>Applied Behavioral Intervention (ABI).</td> <td></td> <td>H2019</td> <td>U5</td> <td>Per one-way trip</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound         H2021         Per one-way trip         85         7.294         \$450,538         \$5,300         \$62         86           Wraparound (SED Waiver)         H2022         Per one-way trip         32         612         \$182,735         \$5,710         \$299         19           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         \$0 <th< td=""><td>Early Intensive Behavioral Intervention (EIBI)</td><td></td><td>H2019</td><td>U5, TG</td><td>Per one-way trip</td><td>2</td><td>3,947</td><td>\$54,293</td><td>\$27,147</td><td>\$14</td><td>1,974</td></th<>	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	2	3,947	\$54,293	\$27,147	\$14	1,974
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maria	Wraparound		H2021		Per one-way trip	85	7,294	\$450,538	\$5,300	\$62	86
Supported Employment Services   H2023   Per one-way trip   0   0   S0   S0   S0   S0   O	Wraparound (SED Waiver)		H2022		Per one-way trip	32	612	\$182,735	\$5,710	\$299	19
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0919   H2030   Refer to code descriptions.   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least op15, 0916, 0919   H2036	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Modelation Review   M0064   Encounter   1   6   \$540   \$540   \$540   \$90   6   \$145   \$	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         6         \$540         \$540         \$90         6           Transportation         \$0209         Encounter         0         0         \$0         <	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         50         50         50         0           Transportation         S0215         Encounter         0         0         50         50         50         50         0           Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         50         50         50         50         0           Home Care Training to Home Care Client         S5108         U5         Encounter         2         44         \$1,499         \$750         \$34         22           Family Training - EBP         S5110         Encounter         0         0         \$0 </td <td>Substance Abuse: Outpatient Care</td> <td></td> <td>H2036</td> <td></td> <td></td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	6	\$540	\$540	\$90	6
Substance Abuse Services: Transportation         \$0.00	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         2         44         \$1,499         \$750         \$34         22           Family Training - EBP         \$5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$157	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,597         \$1,597         \$157         \$10           Family Training         \$5111         HA         Days         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         89         906         \$142,147         \$1,597         \$157         10           Family Training         S5111         HA         Days         0         0         \$0         <	Home Care Training to Home Care Client		S5108	U5	Encounter	2	44	\$1,499	\$750	\$34	22
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	89	906	\$142,147	\$1,597	\$157	10
Family Training S5111 HM Days 73 1,222 \$197,591 \$2,707 \$162 17	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	73	1,222	\$197,591	\$2,707	\$162	17

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	1	1	\$55	\$55	\$55	1
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	20	126	\$47,922	\$2,396	\$380	6
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	1	1	\$290	\$290	\$290	1
Health Services		T1002		15 Minutes	57	84	\$6,821	\$120	\$81	1
Respite Care		T1005		Encounter	102	89,246	\$391,245	\$3,836	\$4	875
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	7	2,799	\$6,273	\$896	\$2	400
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	79	692	\$41,625	\$527	\$60	9
Targeted Case Management		T1017		Per Diem	174	4,239	\$271,107	\$1,558	\$64	24
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	11	943	\$59,903	\$5,446	\$64	86
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	10	100	\$12,300	\$1,230	\$123	10
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	6	43	\$2,449	\$408	\$57	7
Respite Care		T2037		Days	4	84	\$1,909	\$477	\$23	21
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	18	69	\$13,741	\$763	\$199	4

Encounter

Month

Service

ALL

SUB-ELEMENT COST REPORT: Fiscal Year 2014

0

3

0

1,738

0

0

0

\$0

\$0

\$1,334

\$9,506,416

\$0

\$0

\$445

\$0

\$0

0

0

0

Division of Quality Management and Planning Michigan Department of Health and Human Services (Formerly known as Michigan Department of Community Health)

Pharmacy (Drugs and Other Biologicals)

Other

Aggregate for 'J' Codes

**Total Population and Cost** 

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		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	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Manistee-Benzie		vanaa a .	26.110	Unit		***				***
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			4	4	\$932	\$233	\$233	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	19	19	\$9,611	\$506	\$506	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	18	25	\$2,611	\$145	\$104	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	79	287	\$33,984	\$430	\$118	4
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	103	584	\$111,701	\$1,084	\$191	6
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	1	1	\$342	\$342	\$342	1
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	23	90	\$22,550	\$980	\$251	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	26	121	\$45,200	\$1,738	\$374	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	13	41	\$5,629	\$433	\$137	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Manistee-Benzie				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	4	\$2,022	\$2,022	\$506	4
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Manistee-Benzie				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	2	2	\$386	\$193	\$193	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	40	198	\$38,355	\$959	\$194	5
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	29	64	\$23,556	\$812	\$368	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Seryic Captory         Revounted Name         Wilding Management         Control of State (Series)         Control of State (Series)         One	Manistee-Benzie				Unit						
Assessmer Auditin 9926	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertance for Audition	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment   9927	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Audition	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assertance   9923	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accounted Associated Forkism   99334   U5   Execution   0   0   30   30   30   30   30   30	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment für Ausium 99336 Becounter 0 0 0 0 50 50 50 50 0 Assessment 99336 Becounter 0 0 0 50 50 50 50 0 Assessment 99337 Becounter 0 0 0 0 50 50 50 50 0 Assessment 99337 US Encounter 0 0 0 50 50 50 50 50 0 Assessment Assessment für Aufants 99337 US Encounter 0 0 0 0 50 50 50 50 50 50 60 Assessment Assessment 199341 US Encounter 0 0 0 0 50 50 50 50 50 60 Assessment Assessment Fur Aufants 199341 US Encounter 0 0 0 0 50 50 50 50 50 60 Assessment Fur Aufants 199341 US Encounter 0 0 0 0 50 50 50 50 60 Assessment Fur Aufants 199342 US Encounter 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn 9336	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authinn	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99337 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99341 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 No Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 99349 U5 No Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 99340 Assessment for Autism 99340 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 U5 No Minutes 0 0 0 50 50 50 50 50 0 Thinsportation A0000 Assessment for Autism 0 0 0 50 50 50 50 50 0 Thinsportation	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99317 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99340 U5 To Minates 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minates 0 0 0 50 50 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 9341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Authism 9343 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9343 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9348 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Bincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Bincounter 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 9340 U5 Minutes 0 0 0 50 50 50 50 50 0 Assessment for Authism 0 9340 U5 Minutes 0 0 0 50 50 50 50 50 0  Assessment for Authism 0 9340 U5 Minutes 0 0 0 50 50 50 50 50 0  Assessment for Authism 0 9340 U5 Minutes 0 0 0 50 50 50 50 50 0  Assessment for Authism 0 9340 U5 Minutes 0 0 0 50 50 50 50 50 0  Transportation 0 A0000 U	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 9341 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9343 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9348 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9349 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9349 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 9340 U5 Boxounter 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 50 50 0 Assessment for Aurism 0 0 0 50	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99342 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authism 99343 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment of Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99344 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   0   S0   S0   S0   S0   0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         50 Minutes         0         0         SO	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment         99349         Encounter         0         0         50         50         50         50           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         50         60         50         50         50         50         50         60         5	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0100         Encounter         0         0         50	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         50         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: TransportationA0110Encounter00\$0\$0\$0\$0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Manistee-Benzie				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	4	8	\$1,465	\$366	\$183	2
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	74	1,987	\$303,776	\$4,105	\$153	27
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	148	154	\$47,358	\$320	\$308	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	96	118	\$29,502	\$307	\$250	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$73	\$73	\$73	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	28	2,290	\$167,146	\$5,970	\$73	82
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	3	\$72	\$72	\$24	3
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Processing   Pro	Manistee-Benzie				Unit	_		_			
Communicy None Supports in Independent Projection None   IRSAS   Encourage   0   0   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   100	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Price Distance Alleyseed Supports (Severes   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1908   1909	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selection   Sele	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Publisher Name Page   Publisher Name Page Page   Publisher Name Page Page   Publisher Name Page Page Page Page   Publisher Name Page Page Page Page Page Page Page Pag	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Packs   Pack	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Behavior Transmer Plus Reviews - Montrong Activities   H2000   TS   Baccounter   0   0   50   50   50   50   0   0   Comprehensive Modication Services - EBP only   H2010   Baccounter   0   0   50   50   50   0   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptionies Moliculous Services - EBP only   12011   Executator   12   35   \$11,141   \$953   \$327   3   3   3   3   3   3   3   3   3	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intercentine   M2011   Recounter   12   38   \$11,434   \$9853   \$527   3	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill-Bullding and Out of Home Non Vocational Habilitation   H2015   Encounter   0   0   80   50   80   70	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
	Crisis Intervention		H2011		Encounter	12	35	\$11,434	\$953	\$327	3
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	4	2,996	\$13,682	\$3,421	\$5	749
December   Living Supports (Duily)   H2016   TG   Per mile   0   0   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIIB)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound   H2021	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Wraparound		H2021		Per one-way trip	3	77	\$26,693	\$8,898	\$347	26
Manial Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914   H2036   Encounter Session at least 45 min   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0			S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training S5111 HM Days 0 0 \$0 \$0 \$0 0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Manistee-Benzie	Revenue Code H	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	revenue code 1		Wounci							
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	3	3	\$810	\$270	\$270	1
Health Services		T1002		15 Minutes	44	203	\$26,977	\$613	\$133	5
Respite Care		T1005		Encounter	3	2,980	\$8,614	\$2,871	\$3	993
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	1	4	\$500	\$500	\$125	4
Targeted Case Management		T1017		Per Diem	24	448	\$28,390	\$1,183	\$63	19
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	12	11	\$14,518	\$1,210	\$1,320	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Manistee-Benzie				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

278

\$977,889

**Total Population and Cost** 

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Monroe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	89	\$49,207	\$49,207	\$553	89
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	14	86	\$56,307	\$4,022	\$655	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	3	90	\$58,793	\$19,598	\$653	30
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	1	17	\$15,300	\$15,300	\$900	17
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Service Chaptery	Monroe				Unit						
Machement   1979   1970   19	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mesement for Austrian	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Marcainemer   90752   Encounter   67   87   914,768   223   223   1	Assessment		90791			2	2	\$484	\$242	\$242	1
Morest Metally Originates Care   98792   U.S.   Encounter   988   465   \$14.561   \$348   \$79   \$0.	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	67	67	\$14,766	\$220	\$220	1
Subsect above: Opposited Care   0000, (1900, 1904, 1908)   1908	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   9013	Mental Health: Outpatient Care		90832		Encounter	86	463	\$41,661	\$484	\$90	5
Secretaries for Authorn   90831   US   Excounter   125   641   1860/07   1669   151   35   35   35   35   35   35   3	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mereal Health Congusters Care   98034   Encounter   125   641   \$86,098   \$889   \$134   \$5	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Solution colors: Computent Care   (900), 9006, 0014, 0015, 0016, 0019   9034   Encounter 20.30 Min   0   0   50   50   50   50   0   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health Comparison Core   98876   15   15   15   15   15   15   15   1	Mental Health: Outpatient Care		90834		Encounter	125	641	\$86,093	\$689	\$134	5
Assessment for Authism   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   99837   Encounter 25:30 Mm   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   South	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	16	39	\$5,680	\$355	\$146	2
Assessment for Autism 90838 U5 Encounter 45-50 Min 0 0 50 50 50 50 0 0 Psychotherapy for Crisis First 60 Minutes 90839 Encounter 45-50 Min 0 0 0 50 50 50 50 0 0 Therapy-Family Therapy 900846 Encounter 75-80 Min 10 0 0 50 50 50 50 0 Therapy-Family Therapy 900846 Encounter 75-80 Min 147 633 \$108,654 \$739 \$172 4 \$100 \$15,016,019 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Percapy-Family Therapy   90846   Encounter 75-80 Min   147   633   \$108.654   \$739   \$172   4	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90846         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90847         Encounter 75-80 Min         167         833         \$141,552         \$848         \$170         \$5           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 20-30 Min         0         0         \$0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	147	633	\$108,654	\$739	\$172	4
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0019         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         S0         0           Therapy-Group Therapy         90853         Encounter 20-30 Min         0         0         S0         S0 </td <td>Substance Abuse: Outpatient Treatment</td> <td></td> <td>90846</td> <td></td> <td>Encounter 75-80 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Paramy   P	Therapy-Family Therapy		90847		Encounter 75-80 Min	167	833	\$141,552	\$848	\$170	5
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Service Category  Speech & Language Therapy  Speech & Language Therapy  Speech & Language Therapy	Revenue Code	92523 92524	Modifier	Measure Encounter 45-50 Min	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy				Encounter 45-50 Min	0					
		92524			0	0	\$0	\$0	\$0	0
Speech & Language Therapy				Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	2	5	\$1,197	\$599	\$239	3
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	5	9	\$3,206	\$641	\$356	2
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Part	Monroe				Unit						
Assertance   Albanic Services   97800   Each Authorises   97800   Ea	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97814   Real-Additional IS   0   0   93   90   90   90   90   90	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Solumer Abase: Augmenter	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Deletance Abne. Aspective   9781   Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
No. Places Foundation and Management   99,001   16   16   16   17   17   18   18   19   19   19   19   19   19	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parkent Evaluation and Management   99201   U5   Heur   0 0 0 30 30 30 30 30 0 0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Pasient Fishalation and Management   99201	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Antision	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Armer: New Pairent Evaluation and Management   99.01   Excounter   0   0   50   50   50   0   0   New Patient Evaluation and Management   99.204   Excounter   0   0   0   50   50   50   0   0   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management 99204 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99204 U5 Per Hour 0 0 0 50 50 50 50 50 0 0 No. 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99204   Per Hour   0   0   S0   S0   S0   S0   O   New Patient Evaluation and Management   99205   U5   Per Hour   0   0   S0   S0   S0   S0   O   Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O   Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99211   Per Hour   1   2   S948   S948   S474   2   Established Patient Evaluation and Management   99211   U5   Encounter   0   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99212   U5   Encounter   8   9   S439   S55   S49   I   Assessment for Autism   99212   U5   Encounter   0   0   S0   S0   S0   O   Established Patient Evaluation and Management   99213   Encounter   118   278   S23,102   S196   S831   2   Established Patient Evaluation and Management   99214   U5   Encounter   10   0   S0   S0   S0   S0   O   Established Patient Evaluation and Management   99214   U5   Encounter   10   0   S0   S0   S0   S0   S0   S0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Parient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U.5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abase: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour   1	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   8   9   8439   \$55   \$49   1	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   8   9   \$439   \$555   \$59   1     Assessment for Autism   99212   U5   Encounter   0   0   \$50   \$50   \$50   \$0     Assessment for Autism   99213   Encounter   118   278   \$23,102   \$196   \$83   2     Assessment for Autism   99213   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99213   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99214   U5   15 Minutes   198   568   \$89,301   \$451   \$157   33     Assessment for Autism   99214   U5   15 Minutes   95   153   \$52,422   \$289   \$179   \$2     Established Patient Evaluation and Management   99215   U5   15 Minutes   95   153   \$27,422   \$289   \$179   \$2     Assessment for Autism   99215   U5   15 Minutes   95   153   \$27,422   \$289   \$179   \$2     Additional Codes-Physician Services   99212   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99222   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   9923   15 Minutes   0   0   \$50   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   9923   15 Minutes   0   0   \$50   \$50   \$50   \$50   \$0     Additional Codes-Physician Services   9923   15 Minutes   0   0   \$50   \$50   \$50   \$50   \$50   \$50     Additional Codes-Physician Services   9923   15 Minutes   0   0   \$50	Established Patient Evaluation and Management		99211		Per Hour	1	2	\$948	\$948	\$474	2
Assessment for Autism   99212   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0   0   0	Established Patient Evaluation and Management		99212		Encounter	8	9	\$439	\$55	\$49	1
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   U5   15 Minutes   198   568   \$89,301   \$451   \$157   3     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99215   15 Minutes   95   153   \$27,422   \$289   \$179   2     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99221   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99222   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99223   Encounter   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	118	278	\$23,102	\$196	\$83	2
Assessment for Autism         99214         U5         15 Minutes         0         0         S0         S0         S0         0           Established Patient Evaluation and Management         99215         15 Minutes         95         153         \$27,422         \$289         \$179         2           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         95         153         \$27,422         \$289         \$179         2           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99214		15 Minutes	198	568	\$89,301	\$451	\$157	3
Assessment for Autisim         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99223         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99226         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99233         15 Minutes	Established Patient Evaluation and Management		99215		15 Minutes	95	153	\$27,422	\$289	\$179	2
Additional Codes-Physician Services         99222         15 Minutes         0         0         \$	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         \$	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

No.   Controlley	Monroe				Unit						
Descriment   19-206   1.5 minutes   0   0   50   50   50   50   0   0   50   50   50   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment   9927	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
December   97.32	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Anthins	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment   Parkins   99334   15   Excursion   0   0   30   30   30   30   30   30	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Ascessment for Auritim	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authors  Assessment for Authors  P9335 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9336 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9337 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9337 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9337 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9338 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9341 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9342 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9343 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9344 Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9344 Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9344 Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9344 Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9344 Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9344 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9344 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9344 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9345 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9346 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9347 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9348 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9349 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 50 00  Assessment of Authors  P9340 US Encounter 0 0 0 50 50 50 50 50 00  Assessment	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism  Assess	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authinn	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authern 99337 US PROCUMER 0 0 0 80 80 80 80 80 0 0 Assessment for Authern 99341 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99341 US Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99342 Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99343 US Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99344 US Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99343 US Encounter 0 0 0 80 80 80 80 80 0 Assessment for Authern 99344 Encounter 0 0 0 80 80 80 80 80 80 0 Assessment for Authern 99344 Encounter 0 0 0 80 80 80 80 80 80 80 80 80 80 80 8	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austism 99341 US Excounter 0 0 0 50 50 50 50 50 0 0 Assessment for Austism 99341 US Excounter 0 0 0 50 50 50 50 50 0 Assessment for Austism 99342 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Austism 99342 US Excounter 0 0 0 50 50 50 50 50 0 Assessment for Austism 99343 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 US Excounter 0 0 0 50 50 50 50 0 Assessment for Austism 99340 US To Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minares 0 0 0 50 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Amism 99341 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Amism 99342 LECOUNTER ASSESSMENT ASSESSMENT PSYSTAM PSYST	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 9341 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9342 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9343 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9343 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Aurism 9344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Aurism 9345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Aurism 9347 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Aurism 9348 Encounter 0 0 0 S0 S	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 U5 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 U5 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99342 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authism 9943 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authism 9944 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment of Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 O Assessment 6 99345 Encounter 0 0 0 S0 S0 S0 S0 O Assessment for Autism 99345 U5 Encounter 0 0 0 S0 S0 S0 S0 O Assessment for Autism 99347 U5 Encounter 0 0 0 S0 S0 S0 S0 O Assessment for Autism 99347 U5 Encounter 0 0 0 S0 S0 S0 S0 O Assessment for Autism 99348 Encounter 0 0 0 S0 S0 S0 S0 O Assessment for Autism 99348 U5 Encounter 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99348 U5 Encounter 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99349 U5 Encounter 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99349 U5 S0 Minutes 0 S0 S0 S0 S0 S0 S0 O Assessment for Autism 99350 U5 S0 Minutes 0 S0 S	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         O	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         \$0         \$0         0           Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         9         0           Assessment         99350         50 Minutes         0         0         50         50         50         50         9         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         50         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# Chi

n with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 201	4
n with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 20	14

Monroe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	434	677	\$115,794	\$267	\$171	2
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	12	20	\$1,723	\$144	\$86	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	60	7,011	\$298,669	\$4,978	\$43	117
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	2	\$58	\$58	\$29	2
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Part	Monroe				Unit						
Communicy Variety Supprove in Independent Principle on Nome   18043   Encounter   0   0   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Expert   MOMS	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Proc. Process Services   1886   Processory   0   0   0   0   0   0   0   0   0	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuser Laboratory	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Farement Plan Review   110000   150	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Published Flammer Plan Review   12000   Resourer   0   0   0   0   0   0   0   0   0	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehinor Transmer Plan Review - Monitoring Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Description of Michaelino Services - EBP only   19310   Encounter   0   0   50   50   50   0   0   0   0	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Criss Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Scale-Building and Ort of Home Non Vicutional Habilitation   H2014   Encounter   0   0   80   50   80   0   0   0   0   0   0   0   0	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Manures)	Crisis Intervention		H2011		Encounter	44	154	\$14,405	\$327	\$94	4
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	17	1,204	\$3,299	\$194	\$3	71
Delawin Surperes (Duly)   H2016   TG   Per mile   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Part   Intensive Behavioral Intervention (EliB1)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention   H2020   Per one-way trip   0   0   50   \$50   \$50   \$0   \$0   \$0	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound		H2021		Per one-way trip	34	2,829	\$203,094	\$5,973	\$72	83
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50         50         50         50         50         90         90         50         50         50         50         90         90         50         50         50         50         50         50         90	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915   1910   191	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         34         309         \$58,447         \$1,719         \$189         9           Family Training         \$5111         HA         Days         9         12         \$2,198         \$244         \$183         1	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         9         12         \$2,198         \$244         \$183         1	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	34	309	\$58,447	\$1,719	\$189	9
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	НА	Days	9	12	\$2,198	\$244	\$183	1
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Monroe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	4	4	\$1,092	\$273	\$273	1
Health Services		T1002		15 Minutes	229	844	\$33,828	\$148	\$40	4
Respite Care		T1005		Encounter	67	25,816	\$90,872	\$1,356	\$4	385
Respite Care		T1005	TD	Encounter	1	56	\$197	\$197	\$4	56
Respite Care		T1005	TE	15 minutes	1	8	\$28	\$28	\$4	8
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	0	0	\$0	\$0	\$0	0
Targeted Case Management		T1017		Per Diem	271	4,987	\$275,033	\$1,015	\$55	18
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	59	66	\$7,579	\$128	\$115	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Monroe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	13	105	\$10,427	\$802	\$99	8
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other		·-		Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	3	0	\$24,738	\$8,246	\$0	0
Total Population and Cost					548		\$1,865,591			

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service (prigner 1722)         (Service (prign	Montcalm				Unit						
See Menia Readination Festing Injunited CHISP   1908   10   10   10   10   10   10   10	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Decay   Proposition   Companies   Compan	State Psychiatric Hospital - Inpatient PT22			PT22	Days	0	0	\$0	\$0	\$0	0
Composition	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
1900   1900	Local Psychiatric Hospital/IMD PT68			PT68	Days	18	218	\$156,979	\$8,721	\$720	12
Impaire Mospital Accellary Services Loren of Abence   1933	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	5	44	\$30,723	\$6,145	\$698	9
Engries Hayral Anclliny Services - Plantancy	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Ancillary Services - Sandrage   1000	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Indusine Hospital Accillary Services - Radiology	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Impaired Hospital Ancillary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
ECT Ancesheán   0	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Respiratory Services   0.00	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Physical Thompy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inquitient Hospital Ancillary Services - Speech-Language   0440-0444	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Technology (MRT)	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room 0710 # of tests 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Papatient Hospital Ancillary Services - EEG	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care         9762         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge         0901         # of tests         0         0         \$	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological O900, 0902-0904, O911, 0914-0919   Hour   Denounter   Deno	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Treatments/Services   O911, 0914-0919   Outpatient Partial Hospitalization   O912   Encounter   O   O   SO   SO   SO   O   Outpatient Partial Hospitalization   O913   # of visits   O   O   SO   SO   SO   O   O   O   O	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0					Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   Day	Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic   O940-0942   Days   Days   O   O   SO   SO   SO   SO   O   Services	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services         Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0 <th< td=""><td>Inpatient Hospital Ancillary Services - Other Diagnosis Services</td><td>0925</td><td></td><td></td><td>Days</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         \$0         0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

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hildren with Serious Emotional Disturbance SUB-E	ELEMENT COST REPORT: Fisc	scal Year 2014
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Service Captery	Montcalm				Unit						
Assessment   1971   15   17   17   17   18   13   18   19   18   18   18   18   18   18	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment (Austrian 90791 U.S.	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Montaneer   90792	Assessment		90791			71	72	\$45,332	\$638	\$630	1
Second Feath Company	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	1	1	\$264	\$264	\$264	1
Substance above: Outputient Cure   0900, 1906, 1901   98823   Excounter   0   0   0   30   50   30   0   0	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Macesseries   MRS3	Mental Health: Outpatient Care		90832		Encounter	50	83	\$10,368	\$207	\$125	2
Assessment for Antism	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Charpatient Care   90034   Encounter   136   540   \$105,776   \$778   \$196   4	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Ostsparient Care   0903, 0905, 0914, 0915, 0916, 0919   090354   Eacounter 25-30 Min   0   0   30   50   30   0   0   0   0   0   0   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mean Assessment   915, 1916, 1919   91856   US   Encounter 23-30 Mbm   0   0   80   80   80   90   10	Mental Health: Outpatient Care		90834		Encounter	136	540	\$105,776	\$778	\$196	4
Assessment for Autism   90836   U5   Encounter 20-30 Min   0   0   50   50   50   50   50	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   90837   Encounter 25-30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Section   S	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	7	9	\$2,001	\$286	\$222	1
Assessment for Autisin 90888 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   12   18   \$3,183   \$265   \$177   2   \$2   \$2   \$2   \$2   \$2   \$3   \$3,183   \$2   \$2   \$3   \$3   \$3   \$3   \$3   \$	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy   900, 900, 601, 44   90847   Encounter 75-80 Min   12   18   \$3,183   \$265   \$177   2   \$2   \$2   \$2   \$2   \$2   \$2   \$	Therapy-Family Therapy		90846		Encounter 75-80 Min	4	4	\$728	\$182	\$182	1
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Family Therapy		90847		Encounter 75-80 Min	12	18	\$3,183	\$265	\$177	2
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Personal Congress  Personal Personal Content   Pe	Montcalm				Unit						
Speech & Language Therapy	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCHEPHYS	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism 96101 U5 Encounter 75-80 Min 0 0 0 50 50 50 50 0 Psychological Testing by Technicin 96102 U5 30 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp 96103 30 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp 96105 30 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96105 30 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp Assessment-Other 96110 30 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp Assessment-Other 96111 45 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp Assessment-For Minute Psychological Testing by Comp Assessment-For Minute 96111 45 Minutes 0 0 0 50 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96118 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96118 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96119 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96119 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96119 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96119 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Comp Assessment For Autism 96119 45 Minutes 0 0 0 50 50 50 50 Psychological Testing by Psych	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism   96102   U5   30 Minutes   0   0   50   50   50   0	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessments-Other	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsch test by PsychPhys   96116	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys   96118	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech   96119   60 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism   96119   U5   60 Minutes   0   0   S0   S0   S0   S0   0     Neuropsych test Admin wComp   96120   60 Minutes   0   0   S0   S0   S0   S0   0     Medication Administration   96372   60 Minutes   0   0   S0   S0   S0   S0   S0   0     Physical Therapy   97001   First 30-74 Min.   0   0   S0   S0   S0   S0   S0   S0	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp         96120         60 Minutes         0         0         50         50         50         0           Medication Administration         96372         60 Minutes         0         0         50         50         50         50         0           Physical Therapy         97001         First 30-74 Min         0         0         50	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         \$0	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   9701   First 30-74 Min.   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   50   5	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minutes   Occupational Therapy   97003   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         \$0         <	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97003</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97110</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         9/532         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         9753         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97542</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97760</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Montcalm				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	7	9	\$857	\$122	\$95	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	35	42	\$7,314	\$209	\$174	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	125	213	\$56,269	\$450	\$264	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	75	112	\$29,716	\$396	\$265	1
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	17	21	\$6,984	\$411	\$333	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$198	\$198	\$198	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	1	12	\$1,252	\$1,252	\$104	12
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

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Montcalm				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Montcalm				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	24	25	\$2,001	\$83	\$80	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	151	153	\$39,200	\$260	\$256	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	86	91	\$16,007	\$186	\$176	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	145	11,547	\$611,038	\$4,214	\$53	80
Home Based Services		H0036	ST	Encounter	50	2,232	\$122,184	\$2,444	\$55	45
Peer Directed and Operated Support Services		H0038		Encounter	2	37	\$5,285	\$2,643	\$143	19
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Montcalm				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	3	3	\$182	\$61	\$61	1
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	11	46	\$5,803	\$528	\$126	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	3	19	\$749	\$250	\$39	6
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	18	704	\$35,016	\$1,945	\$50	39
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	2	120	\$34,138	\$17,069	\$284	60
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	1	2	\$198	\$198	\$99	2
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	1	13	\$1,364	\$1,364	\$105	13
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0

Power Claim	Montcalm	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Professor   SS145		Revenue Code		Wouller							
Description											0
Expert   State   State   Executor   0   0   30   30   30   30   30   30	-				*						0
											0
Personal Energency Response System (FEER)   \$1515   Pace Proc Contact   0   0   50   50   50   50   50   50											0
Enhanced Modification	- <del></del>										0
Enhanced Medical Equipments Supplies	·							· · · · · · · · · · · · · · · · · · ·			0
Decomposition for Physical Therapy					Face to Face Contact			· · · · · · · · · · · · · · · · · · ·			0
Health Services					Per Service						0
Meath Services	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	Health Services		S9445		15 Minutes	1	1	\$583	\$583	\$583	1
Percention Services - Direct Model	Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program   S9484   15 Minutes   0   0   50   50   50   50	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976   Per dem   O   O   S0   S0   S0   S0	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976   Days   0   0   50   50   50   50	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Private Duty Nursing         T1000         Per Diem         0         0         S0         S0         S0           Private Duty Nursing         T1000         TE         Encounter         0         0         50         50         50           Private Duty Nursing         T1000         TE         Encounter         0         0         50         80         80           Assessment         T1001         Encounter         0         0         50         80         80           Heath Services         T1002         15 Minutes         3         6         \$1,473         \$40         \$246           Respite Care         T1005         Encounter         41         \$1,775         \$1,992         \$1,733         \$4           Respite Care         T1005         TD         Encounter         0         0         \$0 <t< td=""><td>Residential Room and Board</td><td></td><td>S9976</td><td></td><td>Per diem</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Duty Narsing         T1000         TD         Per Diem         0         0         S0         S0         S0           Private Duty Narsing         T1000         TE         Encounter         0         0         S0         S0         S0           Assessment         T1001         Encounter         0         0         S0         S0         S0           Health Services         T1002         15 Minutes         3         6         \$1,473         \$491         \$246           Respite Care         T1005         Encounter         41         17,075         \$71,892         \$1,753         \$4           Respite Care         T1005         TD         Encounter         0         0         50         \$50         \$50         \$4           Respite Care         T1005         TE         15 minutes         0         0         50         \$50	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Narising	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Assessment   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Health Services		T1002		15 Minutes	3	6	\$1,473	\$491	\$246	2
Respite Care         T1005         TE         15 minutes         0         0         SO         SO         SO           Respite Care (Children's Waiver & SED Waiver)         T1005         TT         15 Minutes         0         0         SO         SO         SO           Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         SO         SO         SO           Substance Abuse: Checovery Support Services         T1012         15 Minutes         0         0         SO         SO         SO           Substance Abuse: Recovery Support Services         T1015         Per Diem         0         0         SO         SO         SO           Substance Abuse: Recovery Support Services         T1015         Per Diem         0         0         SO         SO         SO           Substance Abuse: Recovery Support Services         T1016         Per Diem         0         0         SO         SO         SO           Supports Coordination Warp Facilitation         T1016         Per Diem         1         20         \$1,251         \$1,251         \$63           Targeted Case Management         T1017         SE         15 Minutes         0         0         SO         SO <t< td=""><td>Respite Care</td><td></td><td>T1005</td><td></td><td>Encounter</td><td>41</td><td>17,075</td><td>\$71,892</td><td>\$1,753</td><td>\$4</td><td>416</td></t<>	Respite Care		T1005		Encounter	41	17,075	\$71,892	\$1,753	\$4	416
Respite Care (Children's Waiver & SED Waiver)   T1005   T1   15 Minutes   0   0   50   50   50   50   50   50	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services   T109	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services   T1012   15 Minutes   0   0   50   50   50   50	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         Ti016         Per Diem         1         20         \$1,251         \$1,251         \$63           Targeted Case Management         Ti017         Per Diem         \$8         1,253         \$100,462         \$1,732         \$80           Nursing Home Mental Health Monitoring         Ti017         \$E         15 Minutes         0         0         \$0         \$0         \$0         \$0           Personal Care in Licensed Specialized Residential Setting         Ti020         TF         15 Minutes         0         0         \$0 <td< td=""><td>Substance Abuse: Recovery Support Services</td><td></td><td>T1012</td><td></td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         58         1,253         \$100,462         \$1,732         \$80           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>1</td><td>20</td><td>\$1,251</td><td>\$1,251</td><td>\$63</td><td>20</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	1	20	\$1,251	\$1,251	\$63	20
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0         \$0         \$0         \$0           Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0         \$0         \$0         \$0           Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0 <td< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>58</td><td>1,253</td><td>\$100,462</td><td>\$1,732</td><td>\$80</td><td>22</td></td<>	Targeted Case Management		T1017		Per Diem	58	1,253	\$100,462	\$1,732	\$80	22
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         50         50         \$0           Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0         \$0         \$0         \$0           Assessments         T1023         15 Minutes         53         64         \$60,928         \$1,150         \$952           Prevention Services - Direct Model         T1027         Days         0         0         \$0         \$0         \$0         \$0           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0         \$0         \$0         \$0           Transportation         T2001         15 minutes         0         0         \$0         \$0         \$0         \$0           Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0         \$0         \$0         \$0           Transportation         T2002         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         TG         Days         0         0         50         \$0         \$0           Assessments         T1023         15 Minutes         53         64         \$60,928         \$1,150         \$952           Prevention Services - Direct Model         T1027         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         53         64         \$60,928         \$1,150         \$952           Prevention Services - Direct Model         T1027         Days         0         0         \$0         \$0         \$0         \$0           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         50         50         50           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         50         \$0         \$0           Transportation         T2001         15 minutes         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>53</td> <td>64</td> <td>\$60,928</td> <td>\$1,150</td> <td>\$952</td> <td>1</td>	Assessments		T1023		15 Minutes	53	64	\$60,928	\$1,150	\$952	1
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         50         \$0         \$0           Transportation         T2001         15 minutes         0         0         \$0 <td>Prevention Services - Direct Model</td> <td></td> <td>T1027</td> <td></td> <td>Days</td> <td>0</td> <td>0</td> <td>\$0</td> <td></td> <td>\$0</td> <td>0</td>	Prevention Services - Direct Model		T1027		Days	0	0	\$0		\$0	0
Transportation         T2001         15 minutes         0         0         \$0	<del></del>				*		0				0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0         \$0         \$0         \$0           Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0					*						0
Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0	<del></del>										0
	~ <del></del>							·			0
Substance Abuse Services: Transportation T2002 15 Minutes 0 0 \$0 \$0 \$0	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Montcalm				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					348		\$1,567,698			

## Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Muskegon				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	6	128	\$69,260	\$11,543	\$541	21
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	40	267	\$204,406	\$5,110	\$766	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	16	104	\$78,317	\$4,895	\$753	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	2	6	\$35	\$18	\$6	3

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Chargosy	Muskegon				Unit						
Manuscure   1907    150   100   19	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Mescaler   9077	Assessment		90791			186	232	\$41,896	\$225	\$181	1
	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	0	0	\$0	\$0	\$0	0
Substance above: Outputient Cure	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mesement   Miles   M	Mental Health: Outpatient Care		90832		Encounter	39	120	\$8,003	\$205	\$67	3
Meretal Headulina   90835   15   Encounter   1   11   1   15   2089   1   1   1   1   1   1   1   1   1	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Comparison Care   98034   Bincounter   47   111   89,894   521   589   2	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuser Obspatient Care   6000, 5005, 6914, 6915, 6916, 6919   90836   Eacounter 23-30 Min   0   0   50   50   50   50   0   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Menul Health Columinat Cure	Mental Health: Outpatient Care		90834		Encounter	47	111	\$9,894	\$211	\$89	2
Assessment for Authism   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Cutpatient Care   90877   Encounter 20-30 Min   117   365   \$51,524   \$440   \$141   3	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Originient Care   90837   Encounter 26:30 Min   0   0   80   80   80   0   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Spits	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	117	365	\$51,524	\$440	\$141	3
Assessment for Autisin   90838	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   39   53   \$13,724   \$352   \$259   1	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	1	1	\$211	\$211	\$211	1
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   S0   S0   S0   S0   S0   S0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90847   Encounter 75-80 Min   248   1.332   \$188.486   \$760   \$142   5	Therapy-Family Therapy		90846		Encounter 75-80 Min	39	53	\$13,724	\$352	\$259	1
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         S0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Therapy-Group Therapy         90833         Encounter 20-30 Min         0         0         S0         S0 </td <td>Substance Abuse: Outpatient Treatment</td> <td></td> <td>90846</td> <td></td> <td>Encounter 75-80 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90849   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Family Therapy		90847		Encounter 75-80 Min	248	1,332	\$188,486	\$760	\$142	5
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   118   775   \$46,038   \$390   \$59   7	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy   90853   Encounter 20-30 Min   118   775   \$46,038   \$390   \$59   75	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	118	775	\$46,038	\$390	\$59	7
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         50         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
7	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Muskegon		wanaa a .		Unit				aa		***
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	2	4	\$929	\$464	\$232	2
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	1	1	\$327	\$327	\$327	1
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	3	3	\$2,070	\$690	\$690	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	1	1	\$34	\$34	\$34	1
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	1	10	\$2,026	\$2,026	\$203	10
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

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Security of Health Services   97002	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Real Services   97864   Rub Additional IS	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Solume Abse: Acquaraters	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Self-stance Abuse: Augmentation of Management   97311   Encounter   0 0 0 91 91 90 93 0 0 0 0 0 0 0 93 0 90 90 0 0 0 0	Health Services		97804			0	0	\$0	\$0	\$0	0
New Planter Poulantion and Munagement   99,001   15   Neur   0   0   90   50   50   00	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Prising Evaluation of Management   99201   U5   Hour   0   0   0   50   50   50   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Picture Fischation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Secretarian for Authors   99202   US   Henry   0   0   90   90   90   90   90   90	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Foultation and Management   99001   Per Hour   2   2   5287   5144   5144   1	New Patient Evaluation and Management		99202		Per Hour	2	2	\$237	\$118	\$118	1
Assessment for Authin	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Submission Answer New Patent Evaluation and Management   99204   Encounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	2	2	\$287	\$144	\$144	1
New Patient Evaluation and Management   99204   Encounter   4   4   \$878   \$220   \$220   1	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Parkent Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	4	4	\$878	\$220	\$220	1
New Patient Evaluation and Management   99205   Hour   91   94   \$28,614   \$314   \$304   1	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	91	94	\$28,614	\$314	\$304	1
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   U5   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212 U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   0   0   50   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99212		Encounter	5	5	\$288	\$58	\$58	1
Assessment for Autism   99213   U5   Encounter   0   0   80   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   260   806   \$99,334   \$382   \$123   3     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99215   15 Minutes   40   53   \$11,005   \$275   \$208   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99211   15 Minutes   1   1   \$96   \$96   \$96   \$1     Additional Codes-Physician Services   99222   15 Minutes   9   9   \$1,375   \$151   \$151   1     Additional Codes-Physician Services   99223   Encounter   0   0   \$0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99224   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99225   15 Minutes   0   0   \$0   \$0   \$0     Additional Codes-Physician Services   99226   15 Minutes   0   0   \$0   \$0   \$0   \$0     Additional Codes-Physician Services   99231   15 Minutes   3   8   \$375   \$125   \$47   3     Additional Codes-Physician Services   99232   15 Minutes   9   49   \$3,405   \$378   \$69   5     Additional Codes-Physician Services   99233   15 Minutes   9   49   \$3,405   \$378   \$69   5     Additional Codes-Physician Services   99234   15 Minutes   4   19   \$2,574   \$644   \$135   5     Assessment for Autism   99324   15 Minutes   0   0   50   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	35	43	\$3,510	\$100	\$82	1
Assessment for Autism   99214 U5 15 Minutes   0 0 0 80 80 80 80 0 0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         40         53         \$11,005         \$275         \$208         1           Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99214		15 Minutes	260	806	\$99,334	\$382	\$123	3
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         1         1         896         896         996         1           Additional Codes-Physician Services         99222         15 Minutes         9         9         \$1,357         \$151         \$151         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	40	53	\$11,005	\$275	\$208	1
Additional Codes-Physician Services         99222         15 Minutes         9         9         \$1,357         \$151         \$151         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	1	1	\$96	\$96	\$96	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	9	9	\$1,357	\$151	\$151	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         3         8         \$375         \$125         \$47         3           Additional Codes-Physician Services         99232         15 Minutes         9         49         \$3,405         \$378         \$69         5           Additional Codes-Physician Services         99233         15 Minutes         4         19         \$2,574         \$644         \$135         5           Assessment         99324         15 Minutes         0         0         \$0 </td <td>Additional Codes-Physician Services</td> <td></td> <td>99225</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         9         49         \$3,405         \$378         \$69         5           Additional Codes-Physician Services         99233         15 Minutes         4         19         \$2,574         \$644         \$135         5           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9923         15 Minutes         4         19         \$2,574         \$644         \$135         5           Assessment         99324         15 Minutes         0         0         \$0 <t< td=""><td>Additional Codes-Physician Services</td><td></td><td>99231</td><td></td><td>15 Minutes</td><td>3</td><td>8</td><td>\$375</td><td>\$125</td><td>\$47</td><td>3</td></t<>	Additional Codes-Physician Services		99231		15 Minutes	3	8	\$375	\$125	\$47	3
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>9</td> <td>49</td> <td>\$3,405</td> <td>\$378</td> <td>\$69</td> <td>5</td>	Additional Codes-Physician Services		99232		15 Minutes	9	49	\$3,405	\$378	\$69	5
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	4	19	\$2,574	\$644	\$135	5
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

99605

A0080

A0090

A0100

A0100

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#### Children with Serious Emotional Disturbance

#### Muskegon Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Assessment for Autism 99325 U5 15 Minutes 0 0 \$0 \$0 \$0 0 99326 0 0 \$0 \$0 \$0 0 Assessment 15 minutes 99326 U5 0 \$0 \$0 \$0 15 Minutes 0 0 Assessment for Autism 99327 15 Minutes 0 0 \$0 \$0 \$0 0 Assessment 99327 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism 30 Minutes 99328 0 0 \$0 \$0 \$0 0 Encounter Assessment Assessment for Autism 99328 U5 Encounter 0 0 \$0 \$0 \$0 0 Assessment 99334 Encounter 0 0 \$0 \$0 \$0 0 Assessment for Autism 99334 U5 Encounter 0 0 \$0 \$0 \$0 0 Assessment 99335 Encounter 0 0 \$0 \$0 \$0 0 99335 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 99336 0 0 \$0 \$0 \$0 0 Assessment Encounter U5 0 Assessment for Autism 99336 Encounter 0 \$0 \$0 \$0 0 Assessment 99337 Encounter 0 0 \$0 \$0 \$0 0 99337 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 0 \$0 0 Assessment 99341 Encounter 0 \$0 \$0 99341 0 0 \$0 \$0 \$0 0 Assessment for Autism U5 Encounter 99342 0 0 \$0 \$0 \$0 Assessment Encounter 0 Assessment for Autism 99342 U5 Encounter 0 0 \$0 \$0 \$0 0 99343 0 0 \$0 \$0 \$0 0 Assessment Encounter 99343 U5 0 0 \$0 \$0 \$0 0 Encounter Assessment for Autism 99344 0 \$0 \$0 \$0 Encounter 0 0 Assessment U5 99344 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter Assessment 99345 Encounter 0 0 \$0 \$0 \$0 0 Assessment for Autism 99345 U5 Encounter 0 0 \$0 \$0 \$0 0 99347 0 0 \$0 \$0 \$0 0 Assessment Encounter 99347 U5 0 0 \$0 \$0 \$0 0 Assessment for Autism Encounter 0 \$0 0 \$0 \$0 Assessment 99348 Encounter 0 Assessment for Autism 99348 U5 0 0 \$0 \$0 \$0 0 Encounter Assessment 99349 Encounter 0 0 \$0 \$0 \$0 0 U5 0 \$0 \$0 \$0 Assessment for Autism 99349 30 Minutes 0 0 99350 0 0 \$0 \$0 \$0 0 Assessment 50 Minutes 0 99350 U5 0 \$0 \$0 \$0 0 Assessment for Autism 70 Minutes Medication Administration 99506 15 Minutes 0 0 \$0 \$0 \$0 0

35 Minutes

15 Minutes

25 minutes

35 Minutes

Encounter

Encounter

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SUB-ELEMENT COST REPORT: Fiscal Year 2014

Medication Management

Substance Abuse: Transportation

Substance Abuse: Transportation

Transportation

Transportation

Transportation

Transportation

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Presument	Muskegon				Unit						
Interspertation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Interseptation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Meditional Codes   Temporatrism	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Additional Coles   Temperaturing   Color   C	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Panally Training-Support ElePt each	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Rovery Support Services   1001   10   10   10   10   10   10	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Machemen	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounter	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Subtraces Abuse: Caloratory   H8003   Excounter   0   0   50   50   50   50   0	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Curpatient Treatment	Assessment		H0002		Encounter	109	113	\$24,381	\$224	\$216	1
Distance Abos: Case Managemen   Distance Abos: Distance Abos	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management   1005   1600	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acuer Deteorification   1002   H0012   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         006         H0015         Encounter         0         0         50         50         50         0           Crisis Residential         1002         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50         50         50         50         0           Substance Abuse: Early Intervention         H0020         Encounter         0         0         50         50         50         50         0         0         50 <td>Substance Abuse: Case Management</td> <td></td> <td>H0006</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   140014   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Destance Abuse: Outpatient Care   0906   H0015   Encounter   1   2   S821   S821   S411   2	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services   H0018   Encounter   1   2   S821   S821   S411   2	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   100   1	Crisis Residential Services		H0018		Encounter	1	2	\$821	\$821	\$411	2
Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   50   0   0   50   50   50   0	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Designation   H0022   Encounter   0   0   S0   S0   S0   S0   S0   S0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services   H0025   Encounter   0   0   S0   S0   S0   D	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model   H0025   Encounter   3   3   S854   \$285   \$285   1	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$395         \$1           Assessment for Autism         H0031         U5         Encounter         1         3         \$886         \$886         \$295         3           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         156         160         \$63,260         \$406         \$395         1           Assessment for Autism         H0031         U5         Encounter         1         3         \$886         \$886         \$295         3           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0 <td>Prevention Services - Direct Model</td> <td></td> <td>H0025</td> <td></td> <td>Encounter</td> <td>3</td> <td>3</td> <td>\$854</td> <td>\$285</td> <td>\$285</td> <td>1</td>	Prevention Services - Direct Model		H0025		Encounter	3	3	\$854	\$285	\$285	1
Assessment for Autism         H0031         U5         Encounter         1         3         8886         \$886         \$295         3           Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Treatment Planning         H0032         Encounter         26         32         \$7,129         \$274         \$223         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         5         7         \$1,779         \$356         \$254         1           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Assessment		H0031		Encounter	156	160	\$63,260	\$406	\$395	1
Treatment Planning         H0032         Encounter         26         32         \$7,129         \$274         \$223         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         5         7         \$1,779         \$356         \$254         1           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Assessment for Autism		H0031	U5	Encounter	1	3	\$886	\$886	\$295	3
Monitoring of Treatment - Clinician         H0032         TS         Encounter         5         7         \$1,779         \$356         \$254         1           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	26	32	\$7,129	\$274	\$223	1
Health Services         H0034         Encounter         0         0         \$119,42         \$12,899         \$119         \$109           Home Based Services         H0036         ST         Encounter         0         0         \$0 </td <td>Monitoring of Treatment - Clinician</td> <td></td> <td>H0032</td> <td>TS</td> <td>Encounter</td> <td>5</td> <td>7</td> <td>\$1,779</td> <td>\$356</td> <td>\$254</td> <td>1</td>	Monitoring of Treatment - Clinician		H0032	TS	Encounter	5	7	\$1,779	\$356	\$254	1
Home Based Services         H0036         Encounter         176         19,142         \$2,270,142         \$12,899         \$119         109           Home Based Services         H0036         ST         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$2         \$2         \$2           Peer Directed and Operated Support Services         H0038         TF         Encounter         11         574         \$13,183         \$1,198         \$23         52           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         11         574         \$13,183         \$1,198         \$23         52           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0	Home Based Services		H0036		Encounter	176	19,142	\$2,270,142	\$12,899	\$119	109
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	11	574	\$13,183	\$1,198	\$23	52
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Muskegon				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	1	1	\$53	\$53	\$53	1
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	60	251	\$21,842	\$364	\$87	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	50	2,380	\$12,654	\$253	\$5	48
Community Living Supports (15 Minutes)		H2015		Encounter	40	5,152	\$31,129	\$778	\$6	129
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	5	924	\$10,621	\$2,124	\$11	185
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	26	1,296	\$88,546	\$3,406	\$68	50
Wraparound (SED Waiver)		H2022		Per one-way trip	11	53	\$18,663	\$1,697	\$352	5
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	5	169	\$9,153	\$1,831	\$54	34
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	1	2	\$36	\$36	\$18	2
Family Training - EBP		S5110		Encounter	5	8	\$727	\$145	\$91	2
Family Training		S5111		Days	52	257	\$44,782	\$861	\$174	5
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
							-			

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Muskegon				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	1	8	\$2,712	\$2,712	\$339	8
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	4	4	\$222	\$55	\$55	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	1	2	\$63	\$63	\$32	2
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	315	1,187	\$152,847	\$485	\$129	4
Respite Care		T1005		Encounter	26	8,152	\$17,844	\$686	\$2	314
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	187	6,528	\$542,948	\$2,903	\$83	35
Targeted Case Management		T1017		Per Diem	5	33	\$2,726	\$545	\$83	7
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	77	98	\$31,682	\$411	\$323	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	1	1	\$258	\$258	\$258	1
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Muskegon				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	1	8	\$1,155	\$1,155	\$144	8
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	2	2	\$0	\$0	\$0	1
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	4	4	\$2,887	\$722	\$722	1
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	4	0	\$932	\$233	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					699		\$4,246,060			

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Property   Property	Network180				Unit						
Part	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Decay   Propriety   Propriet	State Psychiatric Hospital - Inpatient PT22			PT22	Days	0	0	\$181,293	\$0	\$0	0
Carlo Poychinirs Ringmal Acute Community PT3   Days   12   92   8500   8500   350   8500   70   10   10   10   10   10   10	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Manual Mapul Andellay Services - Remoral Board   914	Local Psychiatric Hospital/IMD PT68			PT68	Days	250	2,138	\$1,677,162	\$6,709	\$784	9
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	13	92	\$50,600	\$3,892	\$550	7
	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Equation Hospital Ascellary Services - Ascelarida Siregical Singular	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Impliant Hospital Ascillary Services - Radorboys	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancellary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
ECT Anceshesia	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services Respiratory Services   0410	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Inquient Hospital Ancillary Services - Physical Therapy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Paper   Pape	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Speech-Language   0440-0444	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Papatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Papaient Hospital Ancillary Services - Pharmacy   0.636   # of tests   0   0   0   50   50   50   0   0   0	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care         0762         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge         0901         # of tests         0         0         \$	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological O900, 0902-0904, O911, 0914-0919	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Treatments/Services   O911, 0914-0919   Outpatient Partial Hospitalization   O912   Encounter   62   309   \$100,041   \$1,614   \$324   5   Outpatient Partial Hospitalization   O913   # of visits   O   O   \$0   \$0   \$0   \$0   \$0   \$0	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0					Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   Day	Outpatient Partial Hospitalization	0912			Encounter	62	309	\$100,041	\$1,614	\$324	5
Inpatient Hospital Ancillary Services - Other Therapeutic Services         0940-0942         Days         0         0         \$0	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services         Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         \$0         0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Notice Control   Notice   No	Network180				Unit						
Machine   1979   1979   1970	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Mesement for Austime	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
December   9072   Encounter   403   418   5232-59   5388   5378   1	Assessment		90791			0	0	\$0	\$0	\$0	0
Moreal Health Originates Circ   98792   U.S.   Encounter   0   0   50   50   50   50   0	Assessment for Autism		90791	U5		3	3	\$1,276	\$425	\$425	1
	Assessment		90792		Encounter	603	619	\$232,529	\$386	\$376	1
Subsect above: Opposited Care   0000, (1900, 1904, 1908)   10   10   10   10   10   10   10   1	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   90133   Encounter   0   0   0   0   0   90   90   90   0	Mental Health: Outpatient Care		90832		Encounter	146	391	\$31,620	\$217	\$81	3
Secondary for Authorn   90813   U5   Encounter   0   0   90   90   90   90   90   90	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mercal Health Computers Care   98034   Encounter   795   4,828   \$480,898   \$605   \$100   6	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Solbstance obsec: Outputient Care   (900, 9006, 0014, 0015, 0016, 0019)   Solbstance obsec: Outputient Care   (901, 5016, 0019)   Solbstance obsec: Outputient Care   Solbst	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Section   S	Mental Health: Outpatient Care		90834		Encounter	795	4,828	\$480,989	\$605	\$100	6
Assessment for Authinn   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   99837   Encounter 20-30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   South	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	229	612	\$76,232	\$333	\$125	3
Assessment for Autism 90838 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Percapy-Family Therapy   90846   Encounter 75-80 Min   16   21   \$2.061   \$129   \$98   1	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90847         Encounter 75-80 Min         278         760         \$68,972         \$248         \$91         3           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915         90847         Encounter 20-30 Min         0         0         \$0	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Therapy-Family Therapy		90846		Encounter 75-80 Min	16	21	\$2,061	\$129	\$98	1
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0019         90847         Encounter 75-80 Min         0         0         S0         S0         S0         0           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         0           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0919         90849         Encounter 20-30 Min         0         0         S0         S0         S0         S0         0         0         S0         S0         S0         S0         0         0         S0         S0         S0         S0         S0         0         0         S0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Paramy   P	Therapy-Family Therapy		90847		Encounter 75-80 Min	278	760	\$68,972	\$248	\$91	3
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   80   80   80   80   80   80	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   90870   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	30	131	\$4,865	\$162	\$37	4
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Network180				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	14	91	\$13,537	\$967	\$149	7
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	2	2	\$270	\$135	\$135	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Network180				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	2	2	\$282	\$141	\$141	1
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	1	1	\$236	\$236	\$236	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	1	1	\$283	\$283	\$283	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	8	8	\$517	\$65	\$65	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	22	30	\$2,388	\$109	\$80	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	670	1,273	\$155,112	\$232	\$122	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	401	741	\$125,826	\$314	\$170	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	72	94	\$22,802	\$317	\$243	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Service Cappary         Revenue for Light         Meridan for March 1972         U.B of Marthal 1972	Network180	D G I	Hanas a 1	)	Unit		***		0.10	G . m :	H : (C
Assessmer for Auditin	Service Category	Revenue Code									
Assertantife Auditin	Assessment for Autism			U5	15 Minutes						
Missesser   9717	Assessment				15 minutes						
Second for Authors	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assertance   92338	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authorn	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accounter	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Ascessment for Authorn	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Accessment for Austrian	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authon 9938 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 9938 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 9938 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 99387 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment 99381 U5 Encounter 0 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 50 0 Assessment 10 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authorn	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 9317 15 16 16 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99317 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99314 1 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99341 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99341 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99341 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99343 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99345 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 15 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99348 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99349 16 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 17 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 99340 18 Encounter 0 0 0 50 50 50 50 50 0 Assessment for Auti	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 9937 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment 99341 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 I Bacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99342 U5 Faccounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 U5 Faccounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 U5 Eacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 U5 Bacounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 U5 To Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism 99365 S 35 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism Assessment for Aurism 99365 S 35 Minutes 0 0 0 50 50 50 50 0 Assessment for Aurism Assessment for Aurism 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 0 Assessment for Aurism 0 0 0 50 50 50 50 0  Assessment for Aurism 0 0 0 50 50 50 50 0  Assessment for Aurism 0 0 0 50 50 50 50 0  Assessment for Aurism 0 0 0 50 50 50 50 0  Assessment for Aurism 0 0 0 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism  99341  U5  Encounter  0  0  0  S0  S0  S0  S0  S0  0  Assessment for Autism  99342  L5  Encounter  0  0  S0  S0  S0  S0  S0  S0  S0  S0	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Aurism 99342 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99343 Encounter 0 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99343 U5 Encounter 0 0 0 0 50 50 50 50 50 50 50 50 50 50 5	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 99342 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 S0 O Assessment of Authism 99343 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 O O Assessment for Authism 99344 U5 Encounter 0 0 0 S0	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment of Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 0 0 Assessment makes for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment makes for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 99347 U5 Encounter 0 0 50 50 50 50 0 Assessment for Autism 99348 Encounter 0 0 50 50 50 50 0 Assessment for Autism 99348 U5 Encounter 0 0 50 50 50 50 0 Assessment for Autism 99349 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99349 U5 Encounter 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 50 50 50 50 50 0 Assessment for Autism 99350 U5 70 Minutes 0 0 50 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 0 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment for Autism 99345 Encounter 0 0 0 S0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   0   S0   S0   S0   0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         50         50         50         0           Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         0           Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5 <th< td=""><td>Assessment</td><td></td><td>99345</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         S0         S0         S0         0           Assessment         99348         Encounter         0         0         S0         S0         S0         0           Assessment for Autism         99348         U5         Encounter         0         0         S0         S0         S0         S0         0           Assessment for Autism         99349         U5         30 Minutes         0         0         S0         S0         S0         S0         0           Assessment for Autism         99349         U5         30 Minutes         0         0         S0         S0         S0         S0         0           Assessment for Autism         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         50         0           Medication Management <td>Assessment for Autism</td> <td></td> <td>99345</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0100         Encounter         0         0         50         50         50	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         50         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Transportation         A0100         35 Minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A0100         Encounter         0         0         50         50         50         50         0           Transportation         A0110         Encounter         0         0         50         50         50         50         0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Colores Alexandres and Allia Colores and Allia C	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Aduse: Fransportation AUTU Encounter U U \$0 \$0 \$0 \$0 0	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Personation	Network180				Unit						
Interportation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Emergenation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Marcian   Mail	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Milliana Cales - Temperatum	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Medicana Closer-Tamporation	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
	Additional Codes-Transportation		A0425		Encounter	11	355	\$1,065	\$97	\$3	32
	Additional Codes-Transportation		A0427		Encounter	3	3	\$516	\$172	\$172	1
Substance Abuse Encourage Support Services   10019   10010	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Montance Abous Individual Assessment   18900	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounted   100002   Encounter   2,107   2,230   \$1,045,263   \$5406   \$5409   \$1.000000000000000000000000000000000000	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abose: Calopation   February   F	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Chapatient Treatment	Assessment		H0002		Encounter	2,107	2,230	\$1,045,263	\$496	\$469	1
Substance Abose: Cour Managemen   1000   100	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Delibration	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abous: Sub-Accur Detoxification   1002   H0012   H0012   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0015         Encounter         37         180         \$49,219         \$1,330         \$273         \$5           Civis Residential         1002         H0018         Encounter         0         0         \$90         \$	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   110014   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0906   H0015   Encounter   0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services         H0018         Encounter         37         180         \$99,219         \$1,330         \$273         \$5           Substance Abuse: Residential         1002         H0018         Encounter         0         0         \$	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   10019   Encounter   0   0   50   50   50   0   0   50   50   50   0	Crisis Residential Services		H0018		Encounter	37	180	\$49,219	\$1,330	\$273	5
Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Destance Abuse: Early Intervention   H0022   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         181         183         \$23,155         \$128         \$127         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Treatment Planning         H0032         Encounter         12         18         \$6,332         \$528         \$352         2           Monitoring of Treatment - Clinician         H0032         TS         Encounter         1         1         \$120         \$120         \$120         \$120         \$1           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Assessment		H0031		Encounter	181	183	\$23,155	\$128	\$127	1
Treatment Planning         H0032         Encounter         12         18         \$6,332         \$528         \$352         2           Monitoring of Treatment - Clinician         H0032         TS         Encounter         1         1         \$120         \$120         \$120         \$120         \$120         \$1           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0 <td>Assessment for Autism</td> <td></td> <td>H0031</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         1         1         \$120	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	12	18	\$6,332	\$528	\$352	2
Health Services         H0034         Encounter         0         0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$120	\$120	\$120	1
Home Based Services         H0036         Encounter         2,174         143,103         \$5,270,557         \$2,424         \$37         66           Home Based Services         H0036         ST         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$14         36           Peer Directed and Operated Support Services         H0038         TF         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1         36         \$1         36           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         3         109         \$1,499         \$500         \$14         36           Substance Abuse: Recovery Support Services         H0038         TF         Encounter         0         0         \$0 <t< td=""><td>Home Based Services</td><td></td><td>H0036</td><td></td><td>Encounter</td><td>2,174</td><td>143,103</td><td>\$5,270,557</td><td>\$2,424</td><td>\$37</td><td>66</td></t<>	Home Based Services		H0036		Encounter	2,174	143,103	\$5,270,557	\$2,424	\$37	66
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	3	109	\$1,499	\$500	\$14	36
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## tional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Network180				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	5	363	\$25,780	\$5,156	\$71	73
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	99	328	\$178,106	\$1,799	\$543	3
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	8	115	\$34,316	\$4,290	\$298	14
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	592	67,456	\$634,682	\$1,072	\$9	114
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	52	1,029	\$293,244	\$5,639	\$285	20
Behavior Services		H2019		Per mile	32	1,108	\$29,608	\$925	\$27	35
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	314	13,947	\$918,911	\$2,926	\$66	44
Wraparound (SED Waiver)		H2022		Per one-way trip	38	413	\$130,245	\$3,428	\$315	11
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	5	44	\$10,200	\$2,040	\$232	9
Supported Employment Services		H2023		Per one-way trip	1	72	\$4,248	\$4,248	\$59	72
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	58	5,622	\$350,374	\$6,041	\$62	97
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	11	11	\$521	\$47	\$47	1
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	361	3,003	\$283,288	\$785	\$94	8
Family Training		S5111	HA	Days	18	182	\$33,282	\$1,849	\$183	10
Family Training		S5111	НМ	Days	209	1,132	\$206,051	\$986	\$182	5

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Network180				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	7	379	\$85,123	\$12,160	\$225	54
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			475	26,505	\$811,977	\$1,709	\$31	56
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	42	553	\$12,478	\$297	\$23	13
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	154	155	\$29,162	\$189	\$188	1
Health Services		T1002		15 Minutes	6	9	\$360	\$60	\$40	2
Respite Care		T1005		Encounter	125	11,523	\$69,939	\$560	\$6	92
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	295	40,185	\$141,607	\$480	\$4	136
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	11	136	\$8,500	\$773	\$63	12
Targeted Case Management		T1017		Per Diem	719	18,960	\$752,812	\$1,047	\$40	26
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	401	450	\$332,958	\$830	\$740	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Network180				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	87	1,213	\$71,000	\$816	\$59	14
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	61	246	\$35,094	\$575	\$143	4
Respite Care		T2037		Days	87	165	\$30,276	\$348	\$183	2
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$34,099	\$0	\$0	0
Other	·			Month	13	0	\$2,198	\$169	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					3,902		\$15,177,058			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Newaygo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	15	\$4,454	\$4,454	\$297	15
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	7	65	\$55,933	\$7,990	\$861	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	37	\$27,122	\$6,780	\$733	9
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	1	1	\$373	\$373	\$373	1
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Newaygo				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			65	65	\$56,409	\$868	\$868	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	86	328	\$89,893	\$1,045	\$274	4
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	121	609	\$74,734	\$618	\$123	5
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	120	360	\$53,845	\$449	\$150	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	116	521	\$113,389	\$977	\$218	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	85	258	\$62,509	\$735	\$242	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	9	73	\$22,992	\$2,555	\$315	8
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

## al Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Newaygo	D G 1	Hanas a l	M 116	Unit	G.	***	G .	G ./G	G .TI.	H : G
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	9	\$2,917	\$2,917	\$324	9
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537	-	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Newaygo				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	1	1	\$66	\$66	\$66	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	15	17	\$2,603	\$174	\$153	1
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	35	44	\$16,171	\$462	\$368	1
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	1	1	\$775	\$775	\$775	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

Newaygo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation	-	A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Newaygo				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	145	158	\$55,874	\$385	\$354	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	15	21	\$1,858	\$124	\$88	1
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	320	544	\$121,881	\$381	\$224	2
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	212	385	\$74,898	\$353	\$195	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	8	45	\$9,258	\$1,157	\$206	6
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	95	4,943	\$456,118	\$4,801	\$92	52
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Personal Processor   Persona	Newaygo				Unit						
Communicy Variety Supprove in Independent Principle on Home   18943   Encounter   0   0   50   50   50   50   50   50	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   1900	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Proc. Process Services   1988	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuser Laboratory	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Farement Plan Review   110000   15	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Published Flammer Plan Review   12000	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehinolizar Transmer Plan Reviews - Monitoring Activities   H3500   TS   Encounter   0   0   50   50   50   50   0   Compendative Modication Services - EBF only   H2501   Encounter   17   89   \$5.297   \$512   \$500   \$5   \$500   \$50	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Description of Michaelino Services - EBP only   19310   Encounter   0   0   50   50   50   50   50   50	Behavior Treatment Plan Review		H2000		Encounter	7	25	\$7,727	\$1,104	\$309	4
Criss Intervention   H2011   Recounter   17   89   \$5.297   \$312   \$60   \$5   \$50	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Scale Bioliding and Ont of Home Non Vocational Habilitation   H2015   Encounter   0   0   0   50   50   50   25   25	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	17	89	\$5,297	\$312	\$60	5
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	1	254	\$1,245	\$1,245	\$5	254
Delawin Surperes (Duly)   H2016   TG   Per mile   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Part   Intensive Behavioral Intervention (EliB1)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention   H2020   Per one-way trip   0   0   S0   S0   S0   S0   0	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround   M2021   Per one-way trip   14   222   \$24.883   \$1.777   \$112   16     Margaround (SED Waiver)   H2022   Tr   Per one-way trip   1   3   \$493   \$493   \$164   3     Margaround (SED Waiver)   H2022   Tr   Per one-way trip   0   0   0   \$50   \$50   \$0   0     Margaround (SED Waiver)   H2022   Tr   Per one-way trip   0   0   0   \$50   \$50   \$50   0     Margaround (SED Waiver)   H2023   Per one-way trip   0   0   0   \$50   \$50   \$50   0     Mental Health Therapy   H2027   Per Mile   0   0   \$50   \$50   \$50   \$50   \$50     Mental Health Therapy   H2027   Per Mile   0   0   \$50   \$50   \$50   \$50   \$50     Mental Health Therapy   H2027   Per Mile   0   0   \$50   \$50   \$50   \$50   \$50     Mental Health Therapy   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Home Based Services: Outpatient Care   1900, 1904, 1914   18235   Hens   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$50   \$50   \$50   \$50     Margaround (SED Waiver)   H2030   Refer to code descriptions.   0   0   \$50   \$	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound		H2021		Per one-way trip	14	222	\$24,883	\$1,777	\$112	16
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	1	3	\$493	\$493	\$164	3
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0905, 0916, 0919   H2036   Encounter Session at least 45 min   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         50         50         50         0           Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0 <t< td=""><td>Medication Review</td><td></td><td>M0064</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         91         370         \$90,635         \$996         \$245         4           Family Training         S5111         HA         Days         0         0         \$	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	91	370	\$90,635	\$996	\$245	4
Family Training         S5111         HM         Days         0         0         \$0         \$0         \$0         \$0         0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

## nce SUB-ELEMENT COST REPORT: Fiscal Year 2014

Professor   Prof	Newaygo				Unit						
Profest   Still   Days	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Engine	Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
	Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
	Respite		S5150		Days	0	0	\$0	\$0	\$0	0
	Respite		S5151		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Debunced Medical Equipments Surpoles	Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Decreptional or Psyskell Therapy	Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Health Services	Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Paulik Services   SW46	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   S4470	Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Presention Services - Direct Model	Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program   S9484   15 Minutes   0   0   50   50   50   0   0   0   0	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976   Per diem   0   0   S0   S0   S0   S0   O	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976   Days   O   O   S0   S0   S0   O	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Privace Duty Naming	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing         T1000         TD         Per Diem         0         0         S0         S0         S0         0           Private Duty Nursing         T1001         TE         Encounter         0         0         50         50         50         0           Assessment         T1001         Encounter         0         0         50         50         50         0           Houlth Services         T1002         15 Minates         99         402         \$41,953         \$424         \$104         4           Respite Care         T1005         Encounter         6         2,634         \$73,722         \$1,229         \$3         439           Respite Care         T1005         TD         Encounter         0         0         \$	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Respite Care   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Health Services		T1002		15 Minutes	99	402	\$41,953	\$424	\$104	4
Respite Care   T1005   TE   15 minutes   0   0   50   50   50   0   0   0   0	Respite Care		T1005		Encounter	6	2,634	\$7,372	\$1,229	\$3	439
Respite Care (Children's Waiver & SED Waiver)   T105   T1   15 Minutes   0   0   50   50   50   0	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         50         50         50         0           Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         50         50         50         0           Family Psycho-Education - EBP         T1015         Per Diem         0         0         50         50         50         0           Supports Coordination/Wrap Facilitation         T1016         Per Diem         0         0         50         50         50         0           Supports Coordination/Wrap Facilitation         T1017         Per Diem         0         0         50         50         50         0           Mursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         T5 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         T6         Days         0         0         50         50         50         0           Assessments	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Per Diem   O   O   SO   SO   SO   O	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         Tiol6         Per Diem         0         0         50         50         50         0           Targeted Case Management         Tiol7         Per Diem         144         1,605         \$166,603         \$1,157         \$104         11           Nursing Home Mental Health Monitoring         Tiol7         SE         15 Minutes         0         0         \$0	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         144         1,605         \$166,603         \$1,157         \$104         11           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>144</td><td>1,605</td><td>\$166,603</td><td>\$1,157</td><td>\$104</td><td>11</td></th<>	Targeted Case Management		T1017		Per Diem	144	1,605	\$166,603	\$1,157	\$104	11
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0 <th< td=""><td>Nursing Home Mental Health Monitoring</td><td></td><td>T1017</td><td>SE</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0 <td>Personal Care in Licensed Specialized Residential Setting</td> <td></td> <td>T1020</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         26         39         \$18,654         \$717         \$478         2           Prevention Services - Direct Model         T1027         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>26</td> <td>39</td> <td>\$18,654</td> <td>\$717</td> <td>\$478</td> <td>2</td>	Assessments		T1023		15 Minutes	26	39	\$18,654	\$717	\$478	2
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation         T2002         15 Minutes         0         0         \$0	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

ALL

#### Children with Serious Emotional Disturbance

#### Newaygo Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0 T2003 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation Hour 0 Transportation T2004 Per Diem 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2004 15 Minutes 0 0 \$0 \$0 \$0 0 Transportation T2005 Encounter Face-to-Face, 0 0 \$0 \$0 \$0 0 generally less than 10 minutes Substance Abuse Services: Transportation T2005 Per Mile 0 0 \$0 \$0 \$0 0 T2024 0 0 \$0 \$0 \$0 0 Prevention Services - Direct Model 15 Minutes T2025 \$516 \$85 Fiscal Intermediary Services 15 Minutes 10 61 \$5,159 6 Enhanced Medical Equipment-Supplies T2028 0 0 \$0 \$0 \$0 Encounter 0 T2029 0 \$0 \$0 Enhanced Medical Equipment-Supplies Encounter 0 \$0 0 Crisis Intervention T2034 Encounter 0 0 \$0 \$0 \$0 0 Respite Care T2036 Encounter 0 0 \$0 \$0 \$0 0 T2037 0 0 \$0 \$0 \$0 0 Respite Care Days 0 \$0 T2038 0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies T2039 15 Minutes 0 0 \$0 \$0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 0 \$0 Pharmacy (Drugs and Other Biologicals) Encounter 0 0 \$0 \$0 0 Other 0 0 \$0 \$0 \$0 Month 0

Service

0

443

0

\$0

\$1,674,091

\$0

\$0

0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Aggregate for 'J' Codes

**Total Population and Cost** 

## Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	237	\$63,279	\$15,820	\$267	59
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	29	313	\$232,767	\$8,026	\$744	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	20	164	\$107,295	\$5,365	\$654	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

North Country				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			2	2	\$910	\$455	\$455	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	111	114	\$53,033	\$478	\$465	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	49	94	\$8,028	\$164	\$85	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	298	1,460	\$207,130	\$695	\$142	5
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	87	324	\$58,893	\$677	\$182	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	63	273	\$46,107	\$732	\$169	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	190	915	\$139,973	\$737	\$153	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	2	9	\$2,363	\$1,182	\$263	5
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	19	72	\$6,159	\$324	\$86	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	12	77	\$13,725	\$1,144	\$178	6
Assessment for Autism		96101	U5	Encounter 75-80 Min	1	8	\$1,856	\$1,856	\$232	8
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	· · · · · · · · · · · · · · · · · · ·	97760	· · · · · · · · · · · · · · · · · · ·	Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

## SUB-ELEMENT COST REPORT: Fiscal Year 2014

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	2	2	\$284	\$142	\$142	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	8	21	\$1,943	\$243	\$93	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	214	746	\$134,744	\$630	\$181	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	61	105	\$18,418	\$302	\$175	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	5	12	\$469	\$94	\$39	2
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	4	17	\$1,599	\$400	\$94	4
Additional Codes-Physician Services		99233		15 Minutes	2	5	\$464	\$232	\$93	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

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Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2	Children with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 201
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North Country	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code			Measure						
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
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## SUB-ELEMENT COST REPORT: Fiscal Year 2014

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	1	2	\$736	\$736	\$368	2
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	526	558	\$192,637	\$366	\$345	1
Assessment for Autism		H0031	U5	Encounter	2	3	\$1,066	\$533	\$355	2
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	469	631	\$150,614	\$321	\$239	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	144	190	\$46,141	\$320	\$243	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	59	99	\$9,132	\$155	\$92	2
Home Based Services		H0036		Encounter	65	6,608	\$560,806	\$8,628	\$85	102
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

## nal Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	1	2	\$390	\$390	\$195	2
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	1	4	\$749	\$749	\$187	4
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	124	578	\$30,380	\$245	\$53	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	2	5	\$525	\$263	\$105	3
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	1	157	\$3,034	\$3,034	\$19	157
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	18	1,588	\$132,674	\$7,371	\$84	88
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	66	97	\$17,458	\$265	\$180	1
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	1	48	\$1,434	\$1,434	\$30	48
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
		33110								
Family Training		S5111		Days	2	5	\$1,950	\$975	\$390	3
Family Training Family Training			НА	Days Days	2 8	5 48	\$1,950 \$20,516	\$975 \$2,565	\$390 \$427	3 6

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Category							0 10		** 1.10
berries emegery	Revenue Code HCPCS C	ode Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care	S5145		Days	4	634	\$123,973	\$30,993	\$196	159
Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Respite	S5151		Encounter	1	4	\$280	\$280	\$70	4
Personal Emergency Response System (PERS)	S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9482			38	1,464	\$216,599	\$5,700	\$148	39
Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1001		Encounter	11	11	\$3,851	\$350	\$350	1
Health Services	T1002		15 Minutes	135	431	\$40,553	\$300	\$94	3
Respite Care	T1005		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1016		Per Diem	5	34	\$3,598	\$720	\$106	7
Targeted Case Management	T1017		Per Diem	100	4,091	\$311,081	\$3,111	\$76	41
Nursing Home Mental Health Monitoring	T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1023		15 Minutes	35	44	\$15,692	\$448	\$357	1
Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1999		Days	0	0	\$0	\$0	\$0	0
Transportation	T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

North Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other	·			Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					784		\$2,985,308			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	11	122	\$95,710	\$8,701	\$785	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	10	74	\$59,694	\$5,969	\$807	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	1			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Captery   Service Captery   Service Captery   Service Captery   Service Capter Capt	Northeast Michigan				Unit						
Assessment   100   1	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertante for Austrant   90791   U.S.   D.   0   0   50   50   50   50   0	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
December   90792   Excenter   71   71   93,115   5907   5907   71	Assessment		90791			1	1	\$186	\$186	\$186	1
	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	71	71	\$43,115	\$607	\$607	1
Substance above: Cupywirest Cure   0000, 1900,	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Second   1985	Mental Health: Outpatient Care		90832		Encounter	25	51	\$4,416	\$177	\$87	2
Secounter for Authorn   90813   U5   Executator   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Comparison Care   98034   Encounter   77   482   \$70,234   \$912   \$146   6   \$   \$   \$   \$   \$   \$   \$   \$	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuser Obspatient Care   6000, 5006, 6914, 6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6916   6915, 6916, 6915   6915, 6916, 691	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Massistance   Maritim   Monta   Mont	Mental Health: Outpatient Care		90834		Encounter	77	482	\$70,234	\$912	\$146	6
Assessment for Aurlian   90836   U5   Encounter 20-30 Min   0   0   50   50   50   50   50   50	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Cutpatient Care   90877   Encounter 20-30 Min   35   183   \$33,751   \$964   \$184   5	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   90837   Encounter 25-30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Spits	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	35	183	\$33,751	\$964	\$184	5
Assessment for Autisin 90888 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   0   0   80   80   80   80   80   80	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Percaps	Therapy-Family Therapy		90846		Encounter 75-80 Min	11	29	\$7,958	\$723	\$274	3
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847         Encounter 75-80 Min         0         0         SO         SO         SO         O           Therapy-Family Therapy         90849         Encounter 20-30 Min         0         0         SO         SO         SO         O           Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         SO         SO         SO         SO         O           Therapy-Group Therapy         90833         Encounter 20-30 Min         0         0         SO         SO </td <td>Substance Abuse: Outpatient Treatment</td> <td></td> <td>90846</td> <td></td> <td>Encounter 75-80 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90849   Encounter 20-30 Min   0   0   50   50   50   50   0	Therapy-Family Therapy		90847		Encounter 75-80 Min	25	82	\$12,668	\$507	\$154	3
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         SO         SO         SO         SO         SO         O           Therapy-Group Therapy         90853         Encounter 20-30 Min         0         0         SO         SO<	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Note	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northeast Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$853	\$853	\$853	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Northeast Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	15	15	\$6,820	\$455	\$455	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	35	36	\$23,166	\$662	\$644	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	1	1	\$104	\$104	\$104	1
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	206	675	\$177,204	\$860	\$263	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	64	114	\$48,493	\$758	\$425	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	5	6	\$929	\$186	\$155	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	2	5	\$217	\$109	\$43	3
Additional Codes-Physician Services		99232		15 Minutes	5	15	\$1,293	\$259	\$86	3
Additional Codes-Physician Services		99233		15 Minutes	2	5	\$589	\$294	\$118	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Category         Revenue Code         HCPCS Code         Modifier         Measure         Cases         Units         Cost         Cost/Case         Cost/Unit           Assessment for Autism         99325         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0           Assessment for Autism         99326         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0           Assessment for Autism         99327         U5         30 Minutes         0         0         \$0         \$0         \$0         \$0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0         \$0         \$0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Assessment for Autism         99334         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Assessment for Autism         99334         Encounter         0         0         \$0         \$0         \$0         \$0	Unit/Case  0  0  0  0  0  0  0
Assessment         99326         15 minutes         0         0         \$0 <td>0 0</td>	0 0
Assessment for Autism         99326         U5         15 Minutes         0         0         \$0	0
Assessment         99327         15 Minutes         0         0         \$0 <td>0</td>	0
Assessment for Autism         99327         U5         30 Minutes         0         0         \$0	
Assessment         99328         Encounter         0         0         \$0	0
Assessment for Autism         99328         U5         Encounter         0         0         \$0	
Assessment         99334         Encounter         0         0         \$0         \$0         \$0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0         \$0         \$0         \$0	0
Assessment for Autism 99334 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
	0
Assessment 99335 Encounter 0 0 \$0 \$0 \$0 \$0	0
	0
Assessment for Autism 99335 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99336 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99336 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99337 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99337 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99341 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99341 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99342 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99342 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99343 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99343 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99344 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99344 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99345 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99345 U5 Encounter 0 0 \$0 \$0 \$0	0
Assessment 99347 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99347 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99348 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99348 U5 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment 99349 Encounter 0 0 \$0 \$0 \$0 \$0	0
Assessment for Autism 99349 U5 30 Minutes 0 0 \$0 \$0 \$0 \$0	0
Assessment 99350 50 Minutes 0 0 \$0 \$0 \$0	0
Assessment for Autism 99350 U5 70 Minutes 0 0 \$0 \$0 \$0 \$0	0
Medication Administration         99506         15 Minutes         0         0         \$0         \$0         \$0	0
Medication Management         99605         35 Minutes         0         0         \$0         \$0         \$0	0
Transportation         A0080         15 Minutes         0         0         \$0         \$0         \$0	0
Transportation         A0090         25 minutes         0         0         \$0         \$0         \$0	0
Transportation         A0100         35 Minutes         0         0         \$0         \$0         \$0	0
Substance Abuse: Transportation A0100 Encounter 0 0 \$0 \$0 \$0 \$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0	0

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Northeast Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	3	3	\$437	\$146	\$146	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	191	196	\$50,924	\$267	\$260	1
Assessment for Autism		H0031	U5	Encounter	1	1	\$512	\$512	\$512	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	124	126	\$20,233	\$163	\$161	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	57	103	\$14,275	\$250	\$139	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	27	1,644	\$89,594	\$3,318	\$54	61
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Northeast Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	103	457	\$27,637	\$268	\$60	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	11	234	\$8,747	\$795	\$37	21
Community Living Supports (15 Minutes)		H2015		Encounter	45	4,231	\$79,667	\$1,770	\$19	94
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	1	34	\$2,154	\$2,154	\$63	34
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	1	263	\$6,486	\$6,486	\$25	263
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	23	870	\$83,501	\$3,630	\$96	38
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	1	2	\$241	\$241	\$120	2
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	82	232	\$89,274	\$1,089	\$385	3
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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Northeast Michigan	Revenue Code HCPO	S Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category			Wiodiner							
Foster Care	S51			Days	0	0	\$0	\$0	\$0	0
Foster Care	S51			Days	0	0	\$0	\$0	\$0	0
Respite	S51			Days	0	0	\$0	\$0	\$0	0
Respite	S51			Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S51			Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S51			Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S51			Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S51			Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S89			Encounter	0	0	\$0	\$0	\$0	0
Health Services	S94			15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S94			15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S94			15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S94				2	236	\$15,185	\$7,593	\$64	118
Intensive Crisis Stabilization-Enrolled Program	S94			15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S99			Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S99			Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10			Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10		TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10		TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T10			Encounter	0	0	\$0	\$0	\$0	0
Health Services	T10			15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care	T10			Encounter	15	24,104	\$26,418	\$1,761	\$1	1,607
Respite Care	T10		TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T10		TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T10	05	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T10	09		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T10	12		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T10	15		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T10	16		Per Diem	4	38	\$3,724	\$931	\$98	10
Targeted Case Management	T10	17		Per Diem	131	6,190	\$395,111	\$3,016	\$64	47
Nursing Home Mental Health Monitoring	T10	17	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20		15 Minutes	1	34	\$9	\$9	\$0	34
Personal Care in Licensed Specialized Residential Setting	T10	20	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T10	23		15 Minutes	18	23	\$4,385	\$244	\$191	1
Prevention Services - Direct Model	T10	27		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T19	99		Days	0	0	\$0	\$0	\$0	0
Transportation	T20	01		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	01		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T20	02		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	02		15 Minutes	0	0	\$0	\$0	\$0	0

Northeast Michigan										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	1	12	\$1,839	\$1,839	\$153	12
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	1	3	\$102	\$102	\$34	3
Respite Care		T2037		Days	3	90	\$180	\$60	\$2	30
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	9	0	\$2,552	\$284	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					355		\$1,510,587			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northern Lakes				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	42	394	\$364,896	\$8,688	\$926	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	16	150	\$117,933	\$7,371	\$786	9
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Northern Lakes				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			382	393	\$121,822	\$319	\$310	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	168	170	\$56,202	\$335	\$331	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	6	8	\$737	\$123	\$92	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	190	1,264	\$125,650	\$661	\$99	7
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	22	72	\$14,590	\$663	\$203	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	42	100	\$11,668	\$278	\$117	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	566	3,373	\$474,122	\$838	\$141	6
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	15	66	\$4,702	\$313	\$71	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	57	60	\$12,360	\$217	\$206	1
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northern Lakes		wanaa a .	34.119	Unit		** .				***
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	3	8	\$1,176	\$392	\$147	3
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	1	1	\$198	\$198	\$198	1
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Northern Lakes				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	2	2	\$622	\$311	\$311	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	4	4	\$498	\$125	\$125	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	59	208	\$32,831	\$556	\$158	4
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	13	35	\$4,423	\$340	\$126	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	264	932	\$117,397	\$445	\$126	4
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	1	1	\$534	\$534	\$534	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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Assessment for Autism Assessment for Autism Assessment for Autism	99325 99326 99326 99326	Modifier U5	Measure 15 Minutes 15 minutes	Cases 0	Units 0	Cost \$0	Cost/Case	Cost/Unit	Unit/Case
Assessment Assessment Assessment	99326 99326				0	\$0			
Assessment for Autism Assessment	99326	U5	15 minutes				\$0	\$0	0
Assessment		U5		0	0	\$0	\$0	\$0	0
_	99327		15 Minutes	0	0	\$0	\$0	\$0	0
			15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism	99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment	99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment	99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism	99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management	99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation	A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation	A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation	A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation	A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation	A0110		Encounter	0	0	\$0	\$0	\$0	0

# sce SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northern Lakes	D G 1	Hanas a 1	M 115	Unit		TT 5	G .	G ./G	G . M :	H ::/G
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	31	32	\$3,872	\$125	\$121	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	397	420	\$113,621	\$286	\$271	1
Assessment for Autism		H0031	U5	Encounter	1	1	\$410	\$410	\$410	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	646	880	\$274,526	\$425	\$312	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	1	1	\$107	\$107	\$107	1
Home Based Services		H0036		Encounter	189	21,021	\$1,575,386	\$8,335	\$75	111
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0
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Northern Lakes				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	11	103	\$3,189	\$290	\$31	9
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	229	1,623	\$150,013	\$655	\$92	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	25	35,263	\$180,076	\$7,203	\$5	1,411
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	94	7,303	\$589,002	\$6,266	\$81	78
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	33	49	\$4,708	\$143	\$96	1
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	19	85	\$14,997	\$789	\$176	4
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
				*						

# pance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Part	Northern Lakes				Unit	_		_			
Poster Care	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Reging	Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
	Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Personal Energyment Regioners System (PURS)	Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Personal Energeory Regionary System (PERS)	Respite		S5151		Encounter	0	0	\$0	\$0	\$0	0
Extracted Modification	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Pathance Abecked Rejugioseus Supplies	Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
	Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Health Services	Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Health Services	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   S8470	Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model   S9482	Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Intensive Crisis Subilization-Enrolled Program	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976   Per diem   0   0   50   50   50   50   50   50	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976   Doys   0   0   50   50   50   0	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Private Duty Narsing	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Darly Narsing	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Daty Nursing   T1000   TE   Encounter   0	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Assessment   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	2	2	\$482	\$241	\$241	1
Respite Care	Health Services		T1002		15 Minutes	63	130	\$6,480	\$103	\$50	2
Respite Care   T1005   TE   15 minutes   0   0   50   50   50   0   0   0   0	Respite Care		T1005		Encounter	9	11,214	\$41,067	\$4,563	\$4	1,246
Respite Care (Children's Waiver & SED Waiver)   T105   TT   15 Minutes   0   0   50   50   50   50   50   50	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         \$0         <	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         50         50         50         0           Family Psycho-Education - EBP         T1015         Per Diem         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         T1016         Per Diem         111         1,126         \$95,418         \$860         \$85         10           Targeted Case Management         T1017         Per Diem         163         3,314         \$207,065         \$1,270         \$62         20           Nursing Home Mental Health Monitoring         T1017         \$E         15 Minutes         0         0         \$0         <	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         163         3,314         \$207,065         \$1,270         \$62         20           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>111</td><td>1,126</td><td>\$95,418</td><td>\$860</td><td>\$85</td><td>10</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	111	1,126	\$95,418	\$860	\$85	10
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>163</td><td>3,314</td><td>\$207,065</td><td>\$1,270</td><td>\$62</td><td>20</td></th<>	Targeted Case Management		T1017		Per Diem	163	3,314	\$207,065	\$1,270	\$62	20
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$1         \$1 <th< td=""><td>Nursing Home Mental Health Monitoring</td><td></td><td>T1017</td><td>SE</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$1         \$1 <td>Personal Care in Licensed Specialized Residential Setting</td> <td></td> <td>T1020</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         120         158         \$75,041         \$625         \$475         1           Prevention Services - Direct Model         T1027         Days         16         205         \$8,287         \$518         \$40         13           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         16         205         \$8,287         \$518         \$40         13           Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>120</td> <td>158</td> <td>\$75,041</td> <td>\$625</td> <td>\$475</td> <td>1</td>	Assessments		T1023		15 Minutes	120	158	\$75,041	\$625	\$475	1
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	16	205	\$8,287	\$518	\$40	13
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         0	Enhanced Medical Supplies or Pharmacy	·	T1999		Days	0	0	\$0	\$0	\$0	0
	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
TOO A CONTRACT OF THE CONTRACT	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
1 ransportation 1 2002 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Northern Lakes				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	5	37	\$1,538	\$308	\$42	7
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other	·			Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					1,132		\$4,807,646			

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northpointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	5	\$4,875	\$4,875	\$975	5
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	11	76	\$62,836	\$5,712	\$827	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	1			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

# sub-Element Cost Report: Fiscal Year 2014

Northpointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	59	61	\$38,829	\$658	\$637	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	54	162	\$14,970	\$277	\$92	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	74	236	\$31,197	\$422	\$132	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	77	326	\$52,874	\$687	\$162	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	39	159	\$24,607	\$631	\$155	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	57	149	\$26,021	\$457	\$175	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	7	38	\$8,611	\$1,230	\$227	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Northpointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	1	\$562	\$562	\$562	1
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	22	24	\$6,071	\$276	\$253	1
Occupational Therapy		97004		Encounter	1	1	\$265	\$265	\$265	1
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	1	2	\$199	\$199	\$99	2
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northpointe				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	1	11	\$518	\$518	\$47	11
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	7	7	\$3,696	\$528	\$528	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	1	1	\$192	\$192	\$192	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	27	31	\$3,975	\$147	\$128	1
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	108	417	\$83,255	\$771	\$200	4
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	15	20	\$6,634	\$442	\$332	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Account for Authorian	Northpointe	Decrees Code	HODOS C. I.	M. Ec.	Unit	Corre	TTotal	Cont	G-+1/G	G/II-h	II. i. C.
Assessment Schalams 99126	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Auditant	Assessment for Autism			U5	15 Minutes						
Secondary   1937   15 Manuers   0   0   0   0   0   0   0   0   0	Assessment				15 minutes						
Second for Astricts	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Securities   9235   Excenter   0   0   93   93   93   90   0   0   0   0   94   95   90   0   0   0   0   94   95   90   0   0   0   0   0   0   0   0	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Austral	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment Per Authorn   99334   US   Executer   0	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assensor   9315   Excenser   0   0   50   50   50   50   50   50	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authins 99335 US Procunter 0 0 0 SS SS SS SS SS SS O Assessment 0 0 SS SS SS SS SS SS SS O Assessment 0 Assessment 0 Assessment 0 SS S	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Secondary   Sec	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authins 9337   Excounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Authins 9337 U5 Excounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Authins 9334   Excounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Authins 9344   Excounter 0 0 0 S0 S0 S0 S0 S0 S0 0 Assessment for Authins 9344 U5 Excounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Authins 9342 U5 Excounter 0 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Authins 9343 U5 Excounter 0 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Authins 9344 Excounter 0 0 S0	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authern 99337 EEcounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99337 U.5 Facounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99341 U.5 Facounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99342 U.5 Facounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99343 U.5 Facounter 0 0 0 50 50 50 50 0 0 0 Assessment for Authern 99343 U.5 Facounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authern 99344 U.5 Facounter 0 0 0 50 50 50 50 50 0 0 0 0 0 0 50 50	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99337 U5 Encounter 0 0 0 50 50 50 0 Assessment 99541 U5 Encounter 0 0 0 50 50 50 0 Assessment Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 0 Assessment Assessment for Aurism 99342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment 1 59343 Encounter 0 0 0 50 50 50 50 0 Assessment 1 59344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Assessment for Aurism 99350 U5 10 Manuels 0 0 0 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99341 U5 Encounter 0 0 0 50 50 50 50 0 0 0 50 50 50 50 0 0 50 5	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Autism 99342 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Autism 99343 U5 Encounter 0 0 0 S0 S0 S0 S0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99348 U5 Encounter 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99348 U5 Encounter 0 0 S0 S0 S0 S0 S0 0 Assessment for Autism 99349 U5 S0 Minutes 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Autism 99349 U5 S0 Minutes 0 0 S0 S0 S0 S0 S0 O Assessment for Autism 99340 U5 S0 Minutes 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Autism 99340 U5 S0 Minutes 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Autism 99350 U5 S0 Minutes 0 0 S0 S0 S0 S0 S0 S0 O Assessment for Autism 99350 U5 S0 Minutes 0 0 S0	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Aurism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99343 Becounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 Becounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aurism 99345 Becounter 0 0 0 50 50 50 50 50 0 0 0 0 0 0 50 50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment For Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment For Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment For Autism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99343 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment 99344 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 S0 S0 S0 S0 S0 O O O O O S0	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment of Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99344         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99345         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99345         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         7	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         SO         50 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         O           Medication Management         99506         15 Minutes         0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         \$0 <t< td=""><td>Assessment for Autism</td><td></td><td>99347</td><td>U5</td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation					0	0	\$0	\$0	\$0	0

# al Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Principation   Alice   Alice	Northpointe				Unit						
Interspertation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Interspectation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Mathibanal Color   Ampropriation   AM25   Excounter   0	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Meditional Codes Temperatures	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Machine Cales - Temperaturin   Marcial Equipment Supplies   E1399   Encounter   0   0   50   50   50   50   0   0   0	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Definition   Def	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Panally Training-Support EleTe on	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services   1001   10   10   10   10   10   10	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuser Individual Assessment	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounter	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Subtrace Abose Caloparient   Featment   Conf. (1964, 1960)	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Comparient Treatment	Assessment		H0002		Encounter	4	4	\$1,086	\$272	\$272	1
	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management   19005   Encounter   0 0 0 5 0 5 0 5 0 5 0 0 0 5 0 5 0 5 0	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acuel Deteorification   1002   H0010   Encounter   0   0   50   50   50   50   0   Substance Abuse: Sub-Acuel Deteorification   1002   H0012   Encounter   0   0   0   50   50   50   0   Substance Abuse: Sub-Acuel Deteorification   1002   H0014   Encounter   0   0   50   50   50   50   0   Substance Abuse: Outputient Care   0966   H0015   Encounter   0   0   50   50   50   50   0   Substance Abuse: Outputient Care   0966   H0015   Encounter   0   0   50   50   50   50   0   Substance Abuse: Acuel Deteorification   1002   H0018   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   50   0   Substance Abuse: Residential   1002   H0019   Encounter   0   0   50   50   50   0   Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   0   Pere Directed and Operated Support Services   H0023   Encounter   0   0   50   50   50   0   Pere Directed and Operated Support Services   H0023   Encounter   0   0   50   50   50   0   Prevention Services - Direct Model   H0025   Encounter   0   0   50   50   50   0   Prevention Services - Direct Model   H0031   Encounter   0   0   50   50   50   50   0   Prevention Services - Direct Aussientification   H0031   U5   Encounter   0   0   50   50   50   50   0   Support Intervention   H0031   HW Encounter   0   0   50   50   50   50   0   Support Intervention   H0032   TS   Encounter   0   0   50   50   50   50   0   Freatment Planing   H0032   TS   Encounter   0   0   50   50   50   50   0   Freatment Planing   H0034   Encounter   0   0   50   50   50   50   0   Freatment Planing   H0034   Encounter   0   0   50   50   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification         1002         H0012         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         1002         H0014         Encounter         0         0         50         50         50         0           Substance Abuse: Sub-Acute Detoxification         0006         H0015         Encounter         0         0         50         50         50         0           Crisis Residential         1002         H0018         Encounter         0         0         50         50         50         0           Substance Abuse: Residential         1002         H0019         Encounter         0         0         50	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   18014   Encounter   0   0   50   50   50   50   0   5	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Destance Abuse: Outpatient Care   0906   H0015   Encounter   0 0 0   \$0 0 0 0 0 0 0 0 0 0 0 0 0 0	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services   H0018   Encounter   0   0   50   50   50   0   50   50	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   1000	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone   H0020   Encounter   0 0 0 50 50 50 50 0 0 0 0 50 50 50 50 0 0 0 0 50 5	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention   H0022   Encounter   0   0   S0   S0   S0   S0   S0   S0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services   H0025   Encounter   0   0   S0   S0   S0   S0   O	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         99         124         \$26,226         \$265         \$212         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         \$1         \$1 </td <td>Assessment</td> <td></td> <td>H0031</td> <td></td> <td>Encounter</td> <td>99</td> <td>124</td> <td>\$26,226</td> <td>\$265</td> <td>\$212</td> <td>1</td>	Assessment		H0031		Encounter	99	124	\$26,226	\$265	\$212	1
Treatment Planning         H0032         Encounter         162         234         \$29,627         \$183         \$127         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         24         83         \$17,643         \$735         \$213         3           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0<	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         24         83         \$17,643         \$735         \$213         3           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0 <t< td=""><td>Support Intensity Scale (SIS) Face-to-Face Assessment</td><td></td><td>H0031</td><td>HW</td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	162	234	\$29,627	\$183	\$127	1
Health Services         H0034         Encounter         0         0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	24	83	\$17,643	\$735	\$213	3
Home Based Services         H0036         Encounter         63         9,703         \$363,668         \$5,773         \$37         154           Home Based Services         H0036         \$T         Encounter         0         0         \$0         <	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	63	9,703	\$363,668	\$5,773	\$37	154
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Northpointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	5	110	\$14,802	\$2,960	\$135	22
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	1	6	\$697	\$697	\$116	6
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	95	698	\$40,833	\$430	\$59	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	28	4,839	\$68,486	\$2,446	\$14	173
Community Living Supports (15 Minutes)		H2015		Encounter	8	1,042	\$10,743	\$1,343	\$10	130
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	1	145	\$24,979	\$24,979	\$172	145
Behavior Services		H2019		Per mile	4	378	\$18,322	\$4,580	\$48	95
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	5	184	\$12,329	\$2,466	\$67	37
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	4	5	\$2,847	\$712	\$569	1
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
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Northpointe		wanaa a .	34.110	Unit		***				***
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	1	11	\$2,273	\$2,273	\$207	11
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	4	5	\$987	\$247	\$197	1
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	10	2,670	\$9,986	\$999	\$4	267
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	159	2,815	\$131,573	\$828	\$47	18
Targeted Case Management		T1017		Per Diem	18	438	\$18,755	\$1,042	\$43	24
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	1	145	\$152	\$152	\$1	145
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	22	26	\$16,319	\$742	\$628	1
Prevention Services - Direct Model		T1027		Days	7	254	\$5,049	\$721	\$20	36
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Northpointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	3	6	\$120	\$40	\$20	2
Fiscal Intermediary Services		T2025		15 Minutes	7	52	\$4,450	\$636	\$86	7
Enhanced Medical Equipment-Supplies		T2028		Encounter	3	4	\$59	\$20	\$15	1
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	1	5	\$603	\$603	\$121	5
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					314		\$1,192,802			

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	10	829	\$221,343	\$22,134	\$267	83
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	114	1,181	\$649,676	\$5,699	\$550	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1	17	\$8,789	\$8,789	\$517	17
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	139	1,076	\$247,251	\$1,779	\$230	8
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

## State of Michigan SUB-ELEMENT COST REPORT: Fiscal Year 2014

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			207	210	\$102,065	\$493	\$486	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	540	545	\$283,618	\$525	\$520	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	343	634	\$68,272	\$199	\$108	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	669	2,295	\$384,459	\$575	\$168	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	713	3,637	\$876,248	\$1,229	\$241	5
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	224	575	\$82,688	\$369	\$144	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	651	2,479	\$492,667	\$757	\$199	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	11	37	\$4,203	\$382	\$114	3
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	63	502	\$53,675	\$852	\$107	8
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	(
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	2	2	\$80	\$40	\$40	1
Speech & Language Therapy		92507		Encounter 75-80 Min	12	345	\$25,140	\$2,095	\$73	29
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	(
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	(

Children with Serious Emotional Disturbance

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	6	9	\$1,113	\$186	\$124	2
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	6	14	\$23,558	\$3,926	\$1,683	2
Assessment for Autism		96101	U5	Encounter 75-80 Min	17	20	\$17,458	\$1,027	\$873	1
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	13	16	\$1,787	\$137	\$112	1
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	6	6	\$1,217	\$203	\$203	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	1	81	\$10,435	\$10,435	\$129	81
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	6	288	\$9,738	\$1,623	\$34	48
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	1	39	\$0	\$0	\$0	39
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	4	4	\$619	\$155	\$155	1
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	7	7	\$649	\$93	\$93	1
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	13	13	\$4,800	\$369	\$369	1
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	10	10	\$3,381	\$338	\$338	1
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	4	4	\$1,568	\$392	\$392	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	4	5	\$383	\$96	\$77	1
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	222	372	\$211,658	\$953	\$569	2
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	887	3,001	\$568,429	\$641	\$189	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	614	1,684	\$320,142	\$521	\$190	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	26	29	\$10,229	\$393	\$353	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	2	158	\$0	\$0	\$0	79
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	8	9	\$2,849	\$356	\$317	1
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	249	254	\$101,079	\$406	\$398	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	3	14	\$0	\$0	\$0	5
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	1,243	1,474	\$708,235	\$570	\$480	1
Assessment for Autism		H0031	U5	Encounter	80	130	\$83,816	\$1,048	\$645	2
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	1,530	6,748	\$835,958	\$546	\$124	4
Monitoring of Treatment - Clinician		H0032	TS	Encounter	3	6	\$790	\$263	\$132	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	959	110,138	\$5,785,869	\$6,033	\$53	115
Home Based Services		H0036	ST	Encounter	11	878	\$50,553	\$4,596	\$58	80
Peer Directed and Operated Support Services		H0038		Encounter	63	196	\$6,861	\$109	\$35	3
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	2	37	\$7,204	\$3,602	\$195	19
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	1	1	\$242	\$242	\$242	1
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	885	3,237	\$419,844	\$474	\$130	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	1	24	\$901	\$901	\$38	24
Community Living Supports (15 Minutes)		H2015		Encounter	146	53,382	\$402,525	\$2,757	\$8	366
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	28	37,549	\$488,475	\$17,446	\$13	1,341
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	99	5,928	\$747,526	\$7,551	\$126	60
Wraparound (SED Waiver)		H2022		Per one-way trip	30	3,969	\$237,578	\$7,919	\$60	132
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	15	505	\$40,704	\$2,714	\$81	34
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training				D	172	1,709	\$360,402	\$2,095	\$211	10
		S5111		Days	172	1,709	\$300,402	Ψ2,075	\$211	
Family Training		S5111 S5111	НА	Days	0	0	\$0	\$0	\$0	0

# sub-Element Cost Report: Fiscal Year 2014

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	3	317	\$152,883	\$50,961	\$482	106
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	6	90	\$13,089	\$2,182	\$145	15
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	1	1	\$116	\$116	\$116	1
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	195	241	\$27,219	\$140	\$113	1
Respite Care		T1005		Encounter	45	25,224	\$90,437	\$2,010	\$4	561
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	5	16	\$3,856	\$771	\$241	3
Targeted Case Management		T1017		Per Diem	237	2,223	\$330,460	\$1,394	\$149	9
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	281	376	\$277,804	\$989	\$739	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
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Oakland				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	16	78	\$5,942	\$371	\$76	5
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	2	6	\$36,037	\$18,019	\$6,006	3
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	103	0	\$56,316	\$547	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
<b>Total Population and Cost</b>					2,652		\$15,962,908			

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ottawa				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	36	341	\$288,616	\$8,017	\$846	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	16	91	\$38,251	\$2,391	\$420	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	3		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307	1			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	17	76	\$28,973	\$1,704	\$381	4
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code										0

Service Captery	Ottawa				Unit						
Management   1979   1971   1972   1	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertante for Austrante   90791   U5	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
December   90792   Executor   76   77   892,00   51,088   51,074   1   1   1   1   1   1   1   1   1	Assessment		90791			116	126	\$83,700	\$722	\$664	1
Secondaries   909/22   U.S.   Encourser   0   0   0   50   50   50   50   50	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	76	77	\$82,690	\$1,088	\$1,074	1
Substance abuse: Outputient Cure	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Machine   Mach	Mental Health: Outpatient Care		90832		Encounter	27	92	\$11,378	\$421	\$124	3
Meretal Health Computerer Circa   Mere	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Comparison Care   990, 981, 900, 991, 990, 991, 990, 991, 990, 991, 990, 991, 990, 991, 991	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuser Outputient Care   (900, 1904, 6914, 6915, 6916,	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Massicance   Mas	Mental Health: Outpatient Care		90834		Encounter	90	481	\$68,426	\$760	\$142	5
Assessment for Authinn   90836   U5   Excounter 20-30 Min   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care   90877   Execumter 20-30 Min   31   104   \$32,935   \$1,062   \$317   3	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   99837   Eacounter 25-30 Mm   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Sp0838	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	31	104	\$32,935	\$1,062	\$317	3
Assessment for Autisin  90888  U5 Encounter 45-50 Min  0 0 0 80 80 80 80 0  Psychotherapy for Crisis First 60 Minutes  90839  Encounter 45-50 Min  0 0 0 80 80 80 80 0  Therapy-Family Therapy  90840  Encounter 75-80 Min  57 208 834-20 8613 8168 4  Substance Abuse: Outpatient Treatment  9090, 6966, 6914, 9054  9015, 6916, 6919  Psept-family Therapy  90847  Encounter 75-80 Min  10 0 0 80 80 80 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 80  9085 90 80 90  9085 90 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 80 90  9085 90 90  9085 90 90  9085 90 90  9085 90 90  9085 90 90  9085 90 90  9	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy   90846   Encounter 75-80 Min   57   208   \$34,20   \$613   \$168   4	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Percaps	Therapy-Family Therapy		90846		Encounter 75-80 Min	57	208	\$34,920	\$613	\$168	4
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
December	Therapy-Family Therapy		90847		Encounter 75-80 Min	217	1,987	\$195,444	\$901	\$98	9
Therapy-Family Therapy   90849   HS   Encounter 20-30 Min   0   0   50   50   50   50   0	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Process   Proc	Ottawa				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech Language Theory	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCHPTYS   96(0)	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Authors   September   Procession of Scholar   September   Sep	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Textails by Technisms	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	16	131	\$71,028	\$4,439	\$542	8
Accounted for Authins   96102   U5   30 Minutes   0   0   30   30   30   30   30   30	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp   96103   30 Minutes   0   0   90   90   90   90   90   90	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessmets-Other 9810 30 Minuse 0 0 30 50 50 50 0 0 Assessmets-Other 9810 30 Minuse 0 0 0 50 50 50 50 0 0 Assessmets-Other 98110 44 Minuse 0 0 0 50 50 50 50 0 0 No. 50 50 50 0 0 No. 50 50 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other 96110 80 Minutes 0 0 50 50 50 50 50 0 0 Assessments-Cherr 96111 44 Minutes 0 0 0 50 50 50 50 50 0 0 Neurope-	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Nemopsyches by PsycPhPsys	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teat by PsychPhys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autsian   96118   U5   45 Minutes   4   6   5922   5230   5154   2     Neuropsych test by Tech   9619   05   60 Minutes   0   0   0   30   30   80   0     Neuropsych test Autsian   96119   U5   60 Minutes   4   7   75773   5193   5110   2     Neuropsych test Admin w Comp   96120   06 Minutes   0   0   50   50   50   0     Medication Administration   96372   66 Minutes   0   0   50   50   50   0     Physical Therapy   97901   Fers 30-74 Min.   0   0   50   50   50   0     Physical Therapy   97902   Each Additional 20   0   50   50   50   0     Physical Therapy   97903   Eacounter   0   0   50   50   50   0     Occupational Therapy   97904   Eacounter   0   0   50   50   50   0     Occupational Therapy   979110   Eacounter   0   0   50   50   50   0     Occupational Therapy   979112   Eacounter   0   0   50   50   50   0     Occupational Therapy   979114   Eacounter   0   0   50   50   50   0     Occupational Therapy   97914   Eacounter   0   0   50   50   50   0     Occupational Therapy   97914   Eacounter   0   0   50   50   50   0     Occupational or Physical Therapy   97140   Eacounter   0   0   50   50   50   0     Occupational or Physical Therapy   97140   Eacounter   0   0   50   50   50   0     Occupational or Physical Therapy   97150   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97150   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97550   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97551   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   Eacounter   0   0   50   50   50   50     Occupational or Physical Therapy   97552   E	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych teat by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
New Sessment for Authorn   96119   U5   60 Minutes   4   7   5773   \$193   \$110   2	Assessment for Autism		96118	U5	45 Minutes	4	6	\$922	\$230	\$154	2
Neuropsych test Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	4	7	\$773	\$193	\$110	2
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   0	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Cocupational Thrapy   97004   Encounter   0   0   S0   S0   S0   S0   S0   O	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97113         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97114         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         S	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97124         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97150         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97530         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97533         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97535         Encounter         0         0         S0         S0         S0         S0         S0         S0         S0	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97150         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97530         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97532         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97533         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97535         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97537         Encounter	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0         \$0         0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy	-	97762		Encounter	0	0	\$0	\$0	\$0	0

Name of Parlian   Name of Pa	Ottawa				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97804   Seab Authorised   15   0   0   15   15   15   15   15	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Manuser   Manu	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Substance Abase: Angesetaties	Health Services		97804			0	0	\$0	\$0	\$0	0
New Patrices Foundation and Management   95:001   U5   Moner   0   0   0   30   30   0   0   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Accounter for Antiers	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Foolantion and Management   99202   U5   Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Accounter for Autom	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Parient Finalation and Management   99201   Per Horr   0   0   50   50   50   50   0	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Above: New Patient Evaluation and Management   92033   Encounter   0   0   30   30   30   30   0   New Patient Evaluation and Management   92044   Encounter   0   0   0   30   50   30   0   New Patient Evaluation and Management   92044   Per Hour   0   0   0   50   50   50   0   New Patient Evaluation and Management   92044   Per Hour   0   0   0   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92045   Hour   0   0   0   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92055   Hour   0   0   0   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92055   Hour   0   0   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92015   Hour   0   0   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92011   De Encounter   0   0   50   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92011   US   Encounter   0   0   50   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92011   US   Encounter   0   0   50   50   50   50   0   Numbers Above: New Patient Evaluation and Management   92012   US   Encounter   0   0   50   50   50   50   0   Numbers Above: New Patient Evaluation and Management   9211   US   Encounter   0   0   50   50   50   50   0   Numbers In Advanced Patient Evaluation and Management   9211   US   Encounter   0   0   50   50   50   50   0   Numbers In Advanced Patient Evaluation and Management   9211   US   Encounter   54   85   \$17,573   \$325   \$305   0   Numbers In Advanced Patient Evaluation and Management   9214   US   IS Minutes   139   415   \$14,791   \$1,104   \$1,04   \$	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Excounter   0   0   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism   99204   U5   Per Hour   0   0   50   50   50   50   0	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 5 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour   Per Hour   O	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   50   50   50   50   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Setablished Patient Evaluation and Management   99214   U5   15 Minutes   0   0   S0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	54	85	\$17,523	\$325	\$206	2
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   33   47   \$24,398   \$739   \$519   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	139	415	\$143,791	\$1,034	\$346	3
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         6         6         5529         \$88         \$88         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0 <t< td=""><td>Established Patient Evaluation and Management</td><td></td><td>99215</td><td></td><td>15 Minutes</td><td>33</td><td>47</td><td>\$24,398</td><td>\$739</td><td>\$519</td><td>1</td></t<>	Established Patient Evaluation and Management		99215		15 Minutes	33	47	\$24,398	\$739	\$519	1
Additional Codes-Physician Services         99222         15 Minutes         6         6         \$529         \$88         \$88         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0 <t< td=""><td>Assessment for Autism</td><td></td><td>99215</td><td>U5</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	6	6	\$529	\$88	\$88	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$1         \$1         \$2         \$2         \$118         \$59         \$59         \$1         \$2         \$2         \$118         \$59         \$59         \$1         \$2         \$2         \$2         \$118         \$59         \$59         \$1         \$2         \$2         \$2         \$118         \$59         \$59         \$1         \$2         \$2         \$2         \$118         \$20         \$26         \$46         \$5         \$2         \$2         \$118         \$20         \$20         \$46         \$5         \$2         \$2         \$118         \$20         \$20         \$67         \$67         \$1         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2         \$2	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         2         2         \$118         \$59         \$59         1           Additional Codes-Physician Services         99232         15 Minutes         5         27         \$1,231         \$246         \$46         5           Additional Codes-Physician Services         99233         15 Minutes         4         4         \$269         \$67         \$67         1           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         5         27         \$1,231         \$246         \$46         5           Additional Codes-Physician Services         99233         15 Minutes         4         4         \$269         \$67         \$67         1           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         4         4         \$269         \$67         \$67         1           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99231		15 Minutes	2	2	\$118	\$59	\$59	1
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>5</td> <td>27</td> <td>\$1,231</td> <td>\$246</td> <td>\$46</td> <td>5</td>	Additional Codes-Physician Services		99232		15 Minutes	5	27	\$1,231	\$246	\$46	5
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	4	4	\$269	\$67	\$67	1
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	1	1	\$21	\$21	\$21	1
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Ottawa				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	181	186	\$23,903	\$132	\$129	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	14	46	\$15,057	\$1,076	\$327	3
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	16	137	\$10,868	\$679	\$79	9
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	116	156	\$16,328	\$141	\$105	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	190	246	\$31,993	\$168	\$130	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	2	2	\$500	\$250	\$250	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	65	4,998	\$383,704	\$5,903	\$77	77
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	2	\$101	\$101	\$51	2
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

New Notice   New Note   New Not	Ottawa				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Persist	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Deep	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Substance Absence Leboratory   19598   Excounter   0   0   50   50   50   50   0   5	Respite		H0045		Encounter	62	654	\$43,513	\$702	\$67	11
Substance Abser: Copysision Freetment   1900, 1906, 1914   1900	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Path-basics   Path-basics   13000   Excounter   0   0   0   0   0   0   0   0   0	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Relativist Transmer Plan Review - Montharing Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Compression & Michaelana Services - ERP ouly   H2010   Encounter   0   0   50   50   50   50   50   50	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Criss Intervention   14201	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill-Building and Our of Home Non Vocational Habilitation   H2015   Encounter   0   0   50   50   50   50   20	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Diffusions)   12015   Encounter   16   6,748   \$34,025   \$2,164   \$5   422   \$100   \$100   \$10	Crisis Intervention		H2011		Encounter	106	310	\$63,357	\$598	\$204	3
Community Living Supports (Dally)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	16	6,748	\$34,625	\$2,164	\$5	422
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Relativist Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   1   9   \$72   \$72   \$88   9	Community Living Supports (Daily)		H2016	TG	Per mile	2	7	\$2,664	\$1,332	\$381	4
Early Intensive Behavioral Intervention (EIIB)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	1	9	\$72	\$72	\$8	9
Marparound (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	4	4,815	\$49,875	\$12,469	\$10	1,204
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy         H2027         Per Mile         0         0         SO         SO         SO         SO         O           Substance Abuse Services: Outpatient Care         0900, 0914, 0915, 0919         H2027         Per Mile         0         0         SO         SO         SO         SO         O           Clubbiouse Psychosocial Rehabilitation Programs         H2030         Refer to code descriptions.         0         0         SO         SO         SO         SO         O           Home Based Services         H2033         Items         0         0         SO         SO         SO         SO         O           Substance Abuse: Outpatient Care         0900, 0906, 0914, 0919         H2035         Encounter         0         0         SO         SO         SO         SO         O           Substance Abuse: Outpatient Care         0900, 0906, 0914, 0919         H2035         Encounter         0         0         SO	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Cutpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50         50         50         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   M064   Encounter Session at least 45	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         3         3         \$600         \$200         \$200         1           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	3	3	\$600	\$200	\$200	1
Substance Abuse Services: Transportation         \$0.00	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         \$5108         U5         Encounter         4         374         \$8,905         \$2,226         \$24         94           Family Training - EBP         \$5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$56         \$2           Family Training         \$5111         HA         Days         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         18         32         \$1,797         \$100         \$56         2           Family Training         S5111         HA         Days         0         0         \$0 </td <td>Home Care Training to Home Care Client</td> <td></td> <td>S5108</td> <td>U5</td> <td>Encounter</td> <td>4</td> <td>374</td> <td>\$8,905</td> <td>\$2,226</td> <td>\$24</td> <td>94</td>	Home Care Training to Home Care Client		S5108	U5	Encounter	4	374	\$8,905	\$2,226	\$24	94
Family Training S5111 HA Days 0 0 \$0 \$0 \$0 \$0 \$0 0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	18	32	\$1,797	\$100	\$56	2
Family Training S5111 HM Days 35 150 \$8,256 \$236 \$55 4	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	35	150	\$8,256	\$236	\$55	4

Ottawa				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	13	50	\$12,935	\$995	\$259	4
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	15	53	\$1,447	\$96	\$27	4
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	4	4	\$1,476	\$369	\$369	1
Health Services		T1002		15 Minutes	159	480	\$119,481	\$751	\$249	3
Respite Care		T1005		Encounter	59	26,332	\$85,549	\$1,450	\$3	446
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	5	835	\$3,872	\$774	\$5	167
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	5	60	\$7,651	\$1,530	\$128	12
Targeted Case Management		T1017		Per Diem	163	1,070	\$63,203	\$388	\$59	7
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	117	158	\$112,088	\$958	\$709	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Ottawa				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	86	699	\$20,487	\$238	\$29	8
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					542		\$2,250,245			

# Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	132	\$61,787	\$61,787	\$468	132
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	5	\$3,683	\$3,683	\$737	5
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	33	280	\$192,352	\$5,829	\$687	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0
-										

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Securical Processor	Pathways				Unit						
Assessment   1971   15   10   0   15   15   10   10   10	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Assistant   90791   U.S.   D.   0   0   90   30   30   30   20	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Mental Health Congulater Care   90000   90000   90000   90000   90000   90000   90000   90000   90000   90000   90000   900000   90000   90000   90000   90000   90000   90000   90000   900000   900000   900000   900000   90000   90000   900000   90000   90000   900000   900000   900000   900000   900000   900000   90000   90000   900000   900000   900000   900000   900000   9000000   900000   900000   900000   900000   900000   900000   90000000   900000000	Assessment		90791			0	0	\$0	\$0	\$0	0
Secondary for Authors	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	74	74	\$46,287	\$626	\$626	1
Substance above: Outputient Cure	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Macissarie	Mental Health: Outpatient Care		90832		Encounter	129	380	\$84,725	\$657	\$223	3
Assessment for Authins	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Menial Health Charpatient Care   90034   Encounter   148   515   \$116,655   \$788   \$227   3	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Ostsparient Care   0903, 0905, 0914, 0915, 0916, 0919   090356   Eacounter 20-30 Min   0   0   30   50   30   0   0   0   0   0   0   0   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Memoral Health: Computence for Authins	Mental Health: Outpatient Care		90834		Encounter	148	515	\$116,653	\$788	\$227	3
Assessment for Autism  90835  U5  Encounter 25-30 Mm  176  1,151  \$392,318  \$2,220  \$341  7  8050bance above Computer Care  90837  Encounter 25-30 Mm  0  0  0  0  50  50  50  50  50  60  Assessment  90838  U5  Encounter 45-50 Mm  0  0  0  50  50  50  50  50  50  50	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   90837   Encounter 25-30 Min   0   0   50   50   50   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   Sp0338	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	176	1,151	\$392,318	\$2,229	\$341	7
Assessment for Autisin    September   Sept	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy For Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   S0   S0   S0   0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915   90847   Encounter 75-80 Min   141   481   \$152,299   \$1,080   \$317   3   3   3   3   3   3   3   3   3	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy   900,0906,0914,   90847   Encounter 75-80 Min   141   481   \$15.299   \$1.080   \$317   3   3   3   3   3   3   3   3   3	Therapy-Family Therapy		90846		Encounter 75-80 Min	108	282	\$90,418	\$837	\$321	3
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	141	481	\$152,299	\$1,080	\$317	3
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   50   50   50   50   50	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   9087   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	5	5	\$1,014	\$203	\$203	1
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         1         1         \$285 <t< td=""><td>Additional Codes-ECT Physician</td><td></td><td>90870</td><td></td><td>Encounter 45-50 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	1	1	\$285	\$285	\$285	1
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
4744460017	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	3	43	\$4,059	\$1,353	\$94	14
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	1	1	\$567	\$567	\$567	1
Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	1	1	\$115	\$115	\$115	1
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0
			· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	1	1	\$565	\$565	\$565	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	113	222	\$35,189	\$311	\$159	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	120	293	\$70,475	\$587	\$241	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	42	65	\$25,104	\$598	\$386	2
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$100	\$100	\$100	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	1	4	\$460	\$460	\$115	4
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Procurement	Pathways				Unit						
Interpolation	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Emergenation	Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Personation   A0173	Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes   Temperatation	Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Mideland Clarkes-Tampepration	Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Pathing Shapper LERF only	Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Family Truning Support EDF 00	Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Substance Above: Education Above: Educ	Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment   110001	Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Accounted   H0002   Encounter   8   8   \$3,387   \$586   \$586   1	Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abose: Caboratory   H0003   Encounter   0   0   50   50   50   50   0	Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Substance Abous: Comparient Treatment   1000, 1004, 10005   10005	Assessment		H0002		Encounter	8	8	\$3,887	\$486	\$486	1
Desire   D	Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management   10006   Encounter   0 0 0 5 0 5 0 5 0 5 0 0 0 5 0 5 0 5 0	Substance Abuse: Outpatient Treatment		H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   H0010   Encounter   0   0   50   50   50   0   50   50	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detexification   1002   1001	Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification   1002   10014   Encounter   0   0   50   50   50   50   0   0   50   50   50   0	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuser: Outputient Care   1906   19015   1901   19015   1901   19015   190	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services   H0018   Encounter   0   0   S0   S0   S0   S0   O	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002	Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential   1002   1009   1000	Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone   H0020   Encounter   0   0   50   50   50   50   0   50	Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention   H0022   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Residential	1002	H0019		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services   H0025   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         H0025         Encounter         0         0         50         50         50         0           Crisis Intervention         H0030         Encounter         0         0         50         50         50         0           Assessment         H0031         Encounter         115         127         \$56,633         \$492         \$446         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H0030         Encounter         0         0         \$0 <t< td=""><td>Peer Directed and Operated Support Services</td><td></td><td>H0023</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Assessment         H0031         Encounter         115         127         \$56,633         \$492         \$446         1           Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Prevention Services - Direct Model		H0025		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         H0031         U5         Encounter         0         0         \$0	Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment         H0031         HW         Encounter         0         0         50         50         50         0           Treatment Planning         H0032         Encounter         257         346         \$86,458         \$336         \$250         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         0         0         \$0         \$80         \$0	Assessment		H0031		Encounter	115	127	\$56,633	\$492	\$446	1
Treatment Planning         H0032         Encounter         257         346         \$86,458         \$336         \$250         1           Monitoring of Treatment - Clinician         H0032         TS         Encounter         10         73         \$18,646         \$1,865         \$255         7           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$	Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Monitoring of Treatment - Clinician         H0032         TS         Encounter         10         73         \$18,646         \$1,865         \$255         7           Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane         H0033         Encounter         0         0         \$0	Treatment Planning		H0032		Encounter	257	346	\$86,458	\$336	\$250	1
Health Services         H0034         Encounter         0         0         \$0	Monitoring of Treatment - Clinician		H0032	TS	Encounter	10	73	\$18,646	\$1,865	\$255	7
Home Based Services         H0036         Encounter         136         13,035         \$572,758         \$4,211         \$44         96           Home Based Services         H0036         \$T         Encounter         0         0         \$0	Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services         H0036         ST         Encounter         0         0         \$0 <t< td=""><td>Health Services</td><td></td><td>H0034</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services         H0038         Encounter         0         0         \$0	Home Based Services		H0036		Encounter	136	13,035	\$572,758	\$4,211	\$44	96
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services H0038 TF Encounter 0 0 80 \$0 \$0 0	Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services NA Encounter 0 0 \$0 \$0 \$0 0	Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	1	8	\$410	\$410	\$51	8
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	3	35	\$7,689	\$2,563	\$220	12
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	145	1,058	\$64,665	\$446	\$61	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	4	1,333	\$7,252	\$1,813	\$5	333
Community Living Supports (15 Minutes)		H2015		Encounter	64	10,192	\$52,591	\$822	\$5	159
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	4	508	\$85,715	\$21,429	\$169	127
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	13	482	\$22,717	\$1,747	\$47	37
Wraparound (SED Waiver)		H2022		Per one-way trip	1	24	\$4,395	\$4,395	\$183	24
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	34	231	\$35,482	\$1,044	\$154	7
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	8	81	\$12,442	\$1,555	\$154	10

Profect   Profession   Profes	Pathways				Unit						
Profest   Shift   Doys	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Engine	Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Description   Septem   Septe	Foster Care		S5145		Days	4	508	\$56,058	\$14,014	\$110	127
	Respite		S5150		Days	0	0	\$0	\$0	\$0	0
	Respite		S5151		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipments Surpoles	Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
Decreptional or Psychical Therapy	Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Health Services	Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Paulik Services	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   S4470	Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Presention Services - Direct Model	Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program   S9484   IS Minutes   0   0   S0   S0   S0   S0   O	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976   Per diem   0   0   50   50   50   50   0	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976   Days   Days   Days   Day   Days   D	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Privace Duty Naming	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing         T1000         TD         Per Diem         0         0         S0         S0         S0         0           Private Duty Nursing         T1001         TE         Encounter         0         0         50         50         50         0           Assessment         T1001         Encounter         0         0         50         50         50         0           Health Services         T1002         15 Minutes         0         0         50         50         50         50           Respite Care         T1005         Encounter         21         10,671         338,629         31,839         34         508           Respite Care         T1005         TD         Encounter         0         0         50	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Respite Care   T1001	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care   T1005   TE   15 minutes   0   0   0   S0   S0   S0   S0   0   0	Respite Care		T1005		Encounter	21	10,671	\$38,629	\$1,839	\$4	508
Respite Care (Children's Waiver & SED Waiver)   T105   TT   15 Minutes   0   0   50   50   50   0   50   50	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         50         50         50         0           Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         50         50         50         0           Family Psycho-Education - EBP         T1015         Per Diem         0         0         50         50         50         0           Supports Coordination/Wrap Facilitation         T1016         Per Diem         66         867         \$575,117         \$1,138         \$87         13           Targeted Case Management         T1017         Per Diem         53         618         \$49,712         \$938         \$80         12           Nursing Home Mental Health Monitoring         T1017         \$E         15 Minutes         0         0         \$0         \$0         \$0         0         0         0         \$0<	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Per Diem   O   O   SO   SO   SO   O	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         Tiol6         Per Diem         66         867         \$75,117         \$1,138         \$87         13           Targeted Case Management         Tiol7         Per Diem         53         618         \$49,712         \$938         \$80         12           Nursing Home Mental Health Monitoring         Tiol7         \$E         15 Minutes         0         0         \$0         \$50         \$0         \$0         0           Personal Care in Licensed Specialized Residential Setting         Tiol20         TF         15 Minutes         0         0         \$0	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         53         618         \$49,712         \$938         \$80         12           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td></td><td>T1016</td><td></td><td>Per Diem</td><td>66</td><td>867</td><td>\$75,117</td><td>\$1,138</td><td>\$87</td><td>13</td></th<>	Supports Coordination/Wrap Facilitation		T1016		Per Diem	66	867	\$75,117	\$1,138	\$87	13
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td></td><td>T1017</td><td></td><td>Per Diem</td><td>53</td><td>618</td><td>\$49,712</td><td>\$938</td><td>\$80</td><td>12</td></th<>	Targeted Case Management		T1017		Per Diem	53	618	\$49,712	\$938	\$80	12
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0 <th< td=""><td>Nursing Home Mental Health Monitoring</td><td></td><td>T1017</td><td>SE</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$24         \$2           Assessments         T1023         15 Minutes         49         75         \$18,290         \$373         \$244         2           Prevention Services - Direct Model         T1027         Days         0         0         \$0<	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         49         75         \$18,290         \$373         \$244         2           Prevention Services - Direct Model         T1027         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>49</td> <td>75</td> <td>\$18,290</td> <td>\$373</td> <td>\$244</td> <td>2</td>	Assessments		T1023		15 Minutes	49	75	\$18,290	\$373	\$244	2
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation         T2002         15 Minutes         0         0         \$0	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Pathways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for T Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					512		\$2,548,000			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# isturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Pines				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	24	\$5,352	\$5,352	\$223	24
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	12	117	\$98,001	\$8,167	\$838	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	8	38	\$26,199	\$3,275	\$689	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0
			·							

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Company   Service Co	Pines				Unit						
Memoria Handin Companient Cear	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	Assessment		90791			9	9	\$1,390	\$154	\$154	1
Substance Above: Curposition Circ   900,000,0004, 14   900,22   Encounter   0   0   0   30   30   30   0   0   0	Assessment		90792		Encounter	38	39	\$11,633	\$306	\$298	1
Mean   March   March	Mental Health: Outpatient Care		90832		Encounter	22	27	\$2,506	\$114	\$93	1
	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Second come   Computer Core   Core	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Marie   Miles   Mile	Mental Health: Outpatient Care		90834		Encounter	130	363	\$49,191	\$378	\$136	3
Memulath Computers Care	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Substance Above: Outputient Cave	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Ascessment	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	158	552	\$89,162	\$564	\$162	3
Psychotherapy for Crisis First 60 Minutes	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Manutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Part	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90846		Encounter 75-80 Min	3	6	\$1,148	\$383	\$191	2
Substance Abuse: Outpatient Treatment	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	22	67	\$12,076	\$549	\$180	3
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$0   \$0   \$	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pack	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915   90853   Encounter 45-50 Min   0   0   0   50   50   50   0   0   0	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician   90870   Encounter 45-50 Min   0   0   50   50   50   0   0	Therapy-Group Therapy		90853		Encounter 20-30 Min	12	78	\$6,047	\$504	\$78	7
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         50         \$0         \$0         0           Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0 </td <td>Substance Abuse: Outpatient Treatment</td> <td></td> <td>90853</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other   90887   Encounter 75-80 Min   0   0   0   50   50   50   0   0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         50         50         50         50         50         0           Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92523         Encounter 45-50 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92524         Encounter 45-50 Min         0         0         50         50         50         50         0           Speech & Language Therapy         92526         Encounter 75-80 Min         0         0         50         50	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy   92507   Encounter 75-80 Min   0   0   50   \$0   \$0   \$0   \$0   \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         50         \$0         \$0         0           Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0<	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         50         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         50         \$0	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92523         Encounter 45-50 Min         0         0         50         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92524         Encounter 45-50 Min         0         0         50         \$0	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92526         Encounter 75-80 Min         0         0         50         \$0	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92610         Encounter 75-80 Min         0         0         50         \$0	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS         96101         Encounter 45-50 Min         0         0         \$0	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician         96102         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp         96103         30 Minutes         0         0         \$0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0

Pines			Unit						
Service Category	Revenue Code HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessments-Other	96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other	96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other	96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam	96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys	96118		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	96119		60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp	96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy	97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy	97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy	97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy	97762		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services	97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services	97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services	97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture	97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture	97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	99201		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	99202		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	99203		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management	99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	99204		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Pines				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	84	262	\$19,039	\$227	\$73	3
Established Patient Evaluation and Management		99213		Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	3	3	\$255	\$85	\$85	1
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$85	\$85	\$85	1
Additional Codes-Physician Services		99223		Encounter	3	3	\$255	\$85	\$85	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	1	4	\$266	\$266	\$66	4
Additional Codes-Physician Services		99232		15 Minutes	4	4	\$340	\$85	\$85	1
Additional Codes-Physician Services		99233		15 Minutes	6	13	\$1,106	\$184	\$85	2
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Pines				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	241	248	\$35,475	\$147	\$143	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	183	189	\$39,321	\$215	\$208	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	179	182	\$25,886	\$145	\$142	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	73	97	\$15,040	\$206	\$155	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	11	682	\$51,956	\$4,723	\$76	62
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0

# nal Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Personal property   No.   No	Pines				Unit						
Assertion Community Processor (ACT)   18209   18209   18200	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
December   December	Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0
	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Per Desired and Operand Support Servines	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Salutuare Abuser Laboratory   Hi058   Encounter   0   0   50   50   50   50   50   50	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Patentane Note: Congruenter Treatment	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Publisher   Teammer Plan Review   12000   Eacouster   0   0   0   50   50   50   0   0   0	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Behavior Teaument Plan Review - Monitoring Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Cries procession   H2010   Recounter   0   0   50   50   50   50   0   1   1   1   1   1   1   1   1	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Part	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill Building and One of Lone New Neutrinoid Habilitation   H2015   Encounter   3   4,182   \$19,007   \$6,356   \$5   1,084	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	32	129	\$7,758	\$242	\$60	4
Community Living Supports (Dubly)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Duily)	Community Living Supports (15 Minutes)		H2015		Encounter	3	4,182	\$19,007	\$6,336	\$5	1,394
Community Living Supports (Dulty)   H2016   TG   Per mile   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019   Per mile   0   0   50   50   50   50   0   0   Crisi Intervention   H2020   Per ons-way trip   0   0   0   50   50   50   50   50	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Maraparound   H2021	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Menaparound (SED Waiver)   H2022   TT   Per one-way trip   0   0   S0   S0   S0   S0   D	Wraparound		H2021		Per one-way trip	4	226	\$20,927	\$5,232	\$93	57
Mental Health Therapy	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Cutpatient Care   0900, 0914, 0915, 0916   0919   0906, 0919   0916, 0919   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0916, 0919   H2036   Encounter Session at least of 0915, 0916, 0919   H2036   H	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         45 min           Medication Review         M0064         Encounter         2         2         \$154         \$77         \$77         1           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         80         80         80         80         0           Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0 <t< td=""><td>Medication Review</td><td></td><td>M0064</td><td></td><td>Encounter</td><td>2</td><td>2</td><td>\$154</td><td>\$77</td><td>\$77</td><td>1</td></t<>	Medication Review		M0064		Encounter	2	2	\$154	\$77	\$77	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         50         50         50         0           Family Training - EBP         S5110         Encounter         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Foster Care         S5140         Days         0         0         \$0	Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0
Foster Care         S5145         Days         0         0         \$0	Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
	Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0

Children with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 2014
es	Unit	

Proping   Prop	Pines				Unit						
Process   SSISS   Security   December   De	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Personal Energesys Regiones System (ERSS)   \$511   Energe   0   0   0   90   90   90   90   90	Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Norman Designation Stroken Stroken   10   10   10   10   10   10   10   1	Respite		S5151		Encounter	0	0	\$0	\$0	\$0	0
Personnerical Modification	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Estimate Medical Equipment Supples   S199   Per Survey   0   0   97   90   90   90   90   90	Personal Emergency Response System (PERS)		S5161		Encounter	0	0	\$0	\$0	\$0	0
	Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Health Services	Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Health Services   S946	Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   Seyfor   15 Minutes   0   0   50   50   50   50   0     Intensive Crisis Stabilization Enrolled Program   Seylar   15 Minutes   0   0   50   50   50   0     Intensive Crisis Stabilization Enrolled Program   Seylar   15 Minutes   0   0   50   50   50   0     Residental Room and Board   Seylor   Per Gero   0   0   50   50   50   50   0     Residental Room and Board   Seylor   Per Gero   0   0   50   50   50   50   0     Private Dury Narsing   T1000   Per Dem   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TD   Per Dem   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   0     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   10     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   10     Private Dury Narsing   T1000   TE   Encounter   0   0   50   50   50   50   10     Require Crise   T1000   TE   Encounter   0   0   50   50   50   50   50     Require Crise   T1000   TE   Encounter   0   0   50   50   50   50   50     Require Crise   Children's Waiver & SED Waiver   T1005   TE   15 minutes   0   0   50   50   50   50     Require Crise   Children's Waiver & SED Waiver   T1005   TE   15 minutes   0   0   50   50   50   50     Substance Abous: Recovery Support Services   T1000   TF   15 minutes   0   0   50   50   50   50     Support Coordination Warp Facilities   T1001   TE   15 minutes   0   0   50   50   50   50     Private Dury Narsing   T1001   TF   15 minutes   0   0   50   50   50   50     Private Dury Narsing   T1001   TF   15 minutes   0   0   50   50   50   50     Private Dury Narsing   T1002   TF   15 minutes   0   0   50   50   50   50     Private Dury Support Services   T1000   TF   15 minutes   0   0   50   50   5	Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization Exerolled Program   S9484   15 Minutes   0   0   50   50   50   50   50   50	Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board   S9976	Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976	Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Privace Duty Nursing	Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Daty Narsing	Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Day Nariang	Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Part	Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Cure	Assessment		T1001		Encounter	9	9	\$492	\$55	\$55	1
Respite Care	Health Services		T1002		15 Minutes	12	12	\$656	\$55	\$55	1
Respite Care   T1005   TE   15 minutes   0   0   50   50   50   50   0   1	Respite Care		T1005		Encounter	2	1,686	\$7,670	\$3,835	\$5	843
Respite Care (Children's Waiver' & SED Waiver)	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         \$0         <	Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         S0         S0         S0         0           Family Psycho-Education - EBP         T1015         Per Diem         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education	Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation   T1016   Per Diem   3   20   \$1,665   \$555   \$83   7	Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         6         47         \$3,983         \$664         \$85         8           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 </td <td>Family Psycho-Education - EBP</td> <td></td> <td>T1015</td> <td></td> <td>Per Diem</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         50         50         50         50         0           Assessments         T1023         15 Minutes         69         89         \$57,993         \$840         \$652         1           Prevention Services - Direct Model         T1027         Days         0         0         \$	Supports Coordination/Wrap Facilitation		T1016		Per Diem	3	20	\$1,665	\$555	\$83	7
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         50         50         50         0           Assessments         T1023         15 Minutes         69         89         \$57,993         \$840         \$652         1           Prevention Services - Direct Model         T1027         Days         0         0         \$	Targeted Case Management		T1017		Per Diem	6	47	\$3,983	\$664	\$85	8
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0 <th< td=""><td>Nursing Home Mental Health Monitoring</td><td></td><td>T1017</td><td>SE</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0 <td>Personal Care in Licensed Specialized Residential Setting</td> <td></td> <td>T1020</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         69         89         \$57,993         \$840         \$652         1           Prevention Services - Direct Model         T1027         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td></td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>69</td> <td>89</td> <td>\$57,993</td> <td>\$840</td> <td>\$652</td> <td>1</td>	Assessments		T1023		15 Minutes	69	89	\$57,993	\$840	\$652	1
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation         T2002         15 Minutes         0         0         \$0	Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2002         15 Minutes         0         0         \$0	Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         T2003         15 Minutes         0         0         \$0	Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation T2003 Hour 0 0 \$0 \$0 \$0 \$0 0	Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0

Pines				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					406		\$613,262			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Saginaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	102	\$52,370	\$13,092	\$513	26
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	13	141	\$113,896	\$8,761	\$808	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	82	813	\$614,573	\$7,495	\$756	10
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Servest Congrey   Servest Co	Saginaw				Unit						
Securical Secu	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Security For Mills   9771   US   0	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment   907%2   Lincounter   99   100   \$18,757   \$1502   \$150   \$1   \$1   \$2   \$2   \$2   \$2   \$2   \$2	Assessment		90791			0	0	\$0	\$0	\$0	0
Secretary Secr	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	99	100	\$18,975	\$192	\$190	1
Substance abuse: Computers Care   1900,	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mariement   Military	Mental Health: Outpatient Care		90832		Encounter	138	504	\$52,579	\$381	\$104	4
Assessment for Austrian   90833	Substance abuse: Outpatient Care		90832		Encounter	0	0	\$0	\$0	\$0	0
Mental Health Charpatient Care   98034   Biacounter   232   1,373   \$115,721   \$585   899   6	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Osignation Circ   0900, 0904, 0914, 0915, 0916, 0919   98334   Encounter 25-30 Min   0   0   50   50   50   50   0	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Chaptainer for Authins	Mental Health: Outpatient Care		90834		Encounter	232	1,373	\$135,721	\$585	\$99	6
Assessment for Autism   90836   U5   Encounter 20.30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance abuse: Outpatient Care		90834		Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Curpatient Care   90877   Excounter 20-30 Mm   159   1,189   \$384,694   \$1,791   \$239   7	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance above: Outputient Care   90837   Encounter 25-30 Min   0   0   80   80   80   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment of Autism 90838   Encounter 45-50 Min 0 0 0 50 50 50 50 0 0 Assessment for Autism 90838   U5	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	159	1,189	\$284,694	\$1,791	\$239	7
Assessment for Autism	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$50   \$50   \$50   0     Dierapy-Family Therapy   90846   Encounter 75-80 Min   67   252   \$50,025   \$5747   \$199   4     Substance Abuse: Outputient Treatment   9090, (9016, 6914, 9015, 6916, 6919   90847   Encounter 75-80 Min   152   660   \$57,579   \$445   \$5102   4     Dierapy-Family Therapy   90847   Encounter 75-80 Min   152   660   \$57,579   \$445   \$5102   4     Dierapy-Family Therapy   90849   Encounter 75-80 Min   0   0   \$0   \$50   \$50   \$50   \$0     Dierapy-Family Therapy   90849   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$50   \$0     Substance Abuse: Outputient Treatment   9090, (9016, 6914, 9015, 9016, 6919   90849   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$0     Substance Abuse: Outputient Treatment   9090, (9016, 6914, 9015, 9016, 6919   90849   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$0     Dierapy-Family Therapy   90833   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$50   \$0     Dierapy-Family Therapy   90853   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$50   \$50     Diestance Abuse: Outputient Treatment   9090, (9016, 9014, 90853   Encounter 20-30 Min   0   0   \$50   \$50   \$50   \$50   \$50   \$50     Diestance Abuse: Outputient Treatment   9090, (9016, 9014, 90853   Encounter 45-50 Min   0   0   \$5	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0990, 0906, 0914, 0915, 0916, 0919   90847   Encounter 75-80 Min   152   660   857,579   \$445   \$102   4	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Perapy-Family Therapy   90847   Encounter 75-80 Min   152   660   \$67.579   \$445   \$102   4	Therapy-Family Therapy		90846		Encounter 75-80 Min	67	252	\$50,025	\$747	\$199	4
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   0   S0   S0   S0   S0   0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Part	Therapy-Family Therapy		90847		Encounter 75-80 Min	152	660	\$67,579	\$445	\$102	4
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   80   80   80   80   80   80	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90870   90870   Encounter 45-50 Min   0   0   0   0   0   0   0   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	31	310	\$88,358	\$2,850	\$285	10
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         1         2         \$975         \$975         \$488         2           Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	1	2	\$975	\$975	\$488	2
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)	·	92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Saginaw	D	Honor of 1	M 116	Unit		TT 1:		G ./G	G . M .	11:10
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	2	\$231	\$231	\$115	2
Assessment for Autism		96101	U5	Encounter 75-80 Min	1	2	\$173	\$173	\$86	2
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	3	35	\$1,897	\$632	\$54	12
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	1	3	\$222	\$222	\$74	3
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	2	96	\$6,370	\$3,185	\$66	48
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0
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# rbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Saginaw				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	1	1	\$1,131	\$1,131	\$1,131	1
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	31	92	\$3,039	\$98	\$33	3
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	146	396	\$25,026	\$171	\$63	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	151	488	\$56,260	\$373	\$115	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	21	27	\$5,587	\$266	\$207	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	74	87	\$5,424	\$73	\$62	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	13	34	\$1,578	\$121	\$46	3
Additional Codes-Physician Services		99232		15 Minutes	66	388	\$26,912	\$408	\$69	6
Additional Codes-Physician Services		99233		15 Minutes	35	106	\$11,849	\$339	\$112	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Saginaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# nce SUB-ELEMENT COST REPORT: Fiscal Year 2014

Saginaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	1	4	\$431	\$431	\$108	4
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	3	3	\$225	\$75	\$75	1
Assessment		H0002		Encounter	3	3	\$1,798	\$599	\$599	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	3	9	\$270	\$90	\$30	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	4	136	\$17,680	\$4,420	\$130	34
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	311	354	\$184,809	\$594	\$522	1
Assessment for Autism		H0031	U5	Encounter	3	3	\$143	\$48	\$48	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	11	37	\$6,026	\$548	\$163	3
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	37	3,678	\$213,859	\$5,780	\$58	99
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	6	13	\$702	\$117	\$54	2
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Saginaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	5	15	\$668	\$134	\$45	3
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	262	1,878	\$226,313	\$864	\$121	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	38	12,154	\$40,594	\$1,068	\$3	320
Community Living Supports (Daily)		H2016		Encounter	2	390	\$11,076	\$5,538	\$28	195
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	1	331	\$17,626	\$17,626	\$53	331
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	71	1,824	\$307,467	\$4,331	\$169	26
Wraparound (SED Waiver)		H2022		Per one-way trip	28	157	\$631	\$23	\$4	6
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	35	40	\$7,623	\$218	\$191	1
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	1	132	\$2,360	\$2,360	\$18	132
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	76	579	\$166,512	\$2,191	\$288	8
Family Training	-	S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	HM	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Foster Care Foster Care	Revenue Code HCPCS Code S5140	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
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Foster Care			Days	0	0	\$0	\$0	\$0	0
	S5145		Days	1	1	\$219	\$219	\$219	1
Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Respite	S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9445		15 Minutes	21	21	\$2,072	\$99	\$99	1
Health Services	S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9482			49	2,176	\$149,158	\$3,044	\$69	44
Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services	T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care	T1005		Encounter	78	44,722	\$210,016	\$2,693	\$5	573
Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	6	1,812	\$49,203	\$8,201	\$27	302
Substance Abuse: Child Sitting Services	T1009		15 minutes	1	8	\$400	\$400	\$50	8
Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1016		Per Diem	7	91	\$6,090	\$870	\$67	13
Targeted Case Management	T1017		Per Diem	259	5,013	\$224,081	\$865	\$45	19
Nursing Home Mental Health Monitoring	T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020		15 Minutes	2	390	\$11,963	\$5,981	\$31	195
Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1023		15 Minutes	294	412	\$143,137	\$487	\$347	1
Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1999		Days	1	1	\$27	\$27	\$27	1
Transportation	T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Saginaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	79	591	\$58,439	\$740	\$99	7
Respite Care		T2037		Days	53	1,276	\$131,568	\$2,482	\$103	24
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	2	2	\$2,002	\$1,001	\$1,001	1
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					854		\$3,820,630			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service (Designe)   Serv	Sanilac				Unit						
Part	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Decal Psychiatric Risposital Mind PTOSS   010,0101,0114,   1970   1909   17   1910   1960   150,007   186,007   18	State Psychiatric Hospital - Inpatient PT22			PT22	Days	0	0	\$0	\$0	\$0	0
Cacil Popular Industry   Cacil Popular Industry   PT73   Days	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Page   18   18   18   18   18   18   18   1	Local Psychiatric Hospital/IMD PT68			PT68	Days	22	167	\$111,365	\$5,062	\$667	8
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	17	130	\$86,691	\$5,099	\$667	8
Experience Herspinal Ancellary Services - Medical Surgest Surgests   Medical Surgest Surgest   Medical Surgest   Medical Surgest Surgest   Medical Surgest Surgest   Medical Surgest Surgest   Medical S	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hospital Ascellary Services - Medical Simples and Devises   Days	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Impaired Hospital Ascillary Services - Industry   0.001-0.	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
ECT Anesthesis	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Experiment Hospital Ancellary Services - Respiratory Services   Out   Out   So   So   So   So   Out     Experiment Hospital Ancellary Services - Physical Therapy   Out   Out   Out   Out   So   So   So   Out     Experiment Hospital Ancellary Services - Physical Therapy   Out   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Speech-Language   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Speech-Language   Out   Out   Out     Experiment Hospital Ancellary Services - Speech-Language   Out   Out   Out     Experiment Hospital Ancellary Services - Putmonary Function   Out   Out   Out     Experiment Hospital Ancellary Services - Putmonary Function   Out   Out   Out     Experiment Hospital Ancellary Services - Putmonary Function   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Putmonary Function   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Andersec   Out   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Magnetic Resonance   Off-Out   Out   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Magnetic Resonance   Off-Out   Out   Out   Out   Out   Out   Out   Out     Experiment Hospital Ancellary Services - Magnetic Resonance   Off-Out   Out   Ou	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Inputient Hospital Ancillary Services - Physical Therapy	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inquient Hospital Ancillary Services - Occupational Therapy   0430-0434	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function   0.460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Patient Hospital Ancillary Services - Pharmacy	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge   0901	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological O911, 0914-0919   Hour   0   0   0   \$0   \$0   \$0   \$0   \$0	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Treatments/Services   0911, 0914-0919   Outpatient Partial Hospitalization   0912   Encounter   0   0   50   50   50   0   0   0   0	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0					Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services   0940-0942   Days   0   0   0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services         Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Sanilac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			16	16	\$5,766	\$360	\$360	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	49	49	\$23,646	\$483	\$483	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	50	226	\$17,010	\$340	\$75	5
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	87	328	\$48,147	\$553	\$147	4
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	129	655	\$112,996	\$876	\$173	5
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	18	33	\$3,396	\$189	\$103	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	104	385	\$53,546	\$515	\$139	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Speech & Language Therapy	Sanilac				Unit						
Seach St. Janguage Theory   9234   Faceurar St. SOM	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Servich & Lamunur Therry	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pools   Pool	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assertance for Autinon   96101	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Post-Deplet   Touting by Technism	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Accounter for Authin	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment Other	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other   96110   30 Minutes   0   0   50   50   50   50	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other   96111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropech tee by PsychPhys   Mean	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychical by PsychPhys	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism   96118   U5   45 Minutes   0   0   50   50   50   50	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropychted by Tech   96119	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism  96119 U5 60 Minutes  0 0 0 50 50 50  Neuropsych tea Admin wComp  96120 60 Minutes  0 0 0 50 50 50  90 50 50  Physical Therapy  97001 First 30-74 Min.  0 0 0 50 50 50  Physical Therapy  97002 Each Additional 30 0 0 0 50 50  Physical Therapy  97003 Each Additional 30 0 0 0 50 50  Physical Therapy  97004 Each Additional 30 0 0 0 50 50  Coccupational Therapy  97005 Each Additional 30 0 0 0 50 50  Physical Therapy  97006 Each Additional 30 0 0 0 50 50  Physical Therapy  97006 Each Additional 30 0 0 0 50 50  Physical Therapy  97007 Each Additional 30 0 0 0 50 50  Physical Therapy  97008 Each Additional 30 0 0 0 50 50  Physical Therapy  97009 Each Additional 30 0 0 0 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97112 Eacounter  0 0 0 50 50 50  Physical Therapy  97113 Eacounter  0 0 0 50 50 50  Physical Therapy  97114 Eacounter  0 0 0 50 50 50  Physical Therapy  97114 Eacounter  0 0 0 50 50 50  Physical Therapy  97114 Eacounter  0 0 0 50 50 50  Physical Therapy  97115 Eacounter  0 0 0 50 50 50  Physical Therapy  97116 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97110 Eacounter  0 0 0 50 50 50  Physical Therapy  97150 Eacounter  0 0 0 50 50 50  Physical Therapy  97150 Eacounter  0 0 0 50 50 50  Physical Therapy  97151 Eacounter  0 0 0 50 50 50  Physical Therapy  97152 Eacounter  0 0 0 50 50 50  Physical Therapy  97154 Eacounter  0 0 0 50 50 50  Physical Therapy  97155 Eacounter  0 0 0 50 50 50  Physical Therapy  97150 Eacounter  0 0 0 50 50 50  Physical Therapy  97151 Eacounter  0 0 0 50 50 50  Physical Therapy  97152 Eacounter  0 0 0 50 50 50  Physical Therapy  97154 Eacounter  0 0 0 50 50 50  Physical Therapy  97155 Eacounter  0 0 0 50 50 50  Physical Therapy  97155 Eacounter  0 0 0 50 50 50  Physical Therapy  971	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin wComp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         80         80         80           Physical Therapy         97001         First 30-74 Min.         0         0         50         80         80           Physical Therapy         97002         Each Additional 200.         0         0         50         80           Occupational Therapy         97003         Encounter         13         13         \$2.845         \$219         \$219           Occupational Therapy         97004         Encounter         0         0         50         \$0	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   50	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   9702   Each Additional 30   0   0   S0   S0   S0   S0	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         \$0         <	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97113         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97124         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97140         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97150         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97530         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97533         Encounter         0         0         SO         SO         SO           Occupational or Physical Therapy         97535         <	Occupational Therapy		97003		Encounter	13	13	\$2,845	\$219	\$219	1
Occupational or Physical Therapy         97112         Encounter         0         0         50         50         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97110</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         50         50         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         50         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         10         30         \$2,082         \$208         \$69           Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         10         30         \$2,082         \$208         \$69           Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td< td=""><td>Occupational or Physical Therapy</td><td></td><td>97140</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         9760         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         9760         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97530		Encounter	10	30	\$2,082	\$208	\$69	3
Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy	·	97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0         \$0         \$0	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy 97762 Encounter 0 0 0 \$0 \$0 \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Name	Sanilac				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part   Part	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abner Augustume	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Submance Abuse: Accordance   97811     Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
New Placin Foliation and Minagement   99:01   15   New   0   0   0   39   50   30   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   92302   Per Hour   0   0   30   30   30   30   0   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Placies Fischlatrios and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Ascessment for Authins	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Fouluation and Management   992051   Per Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Accessment for Authinn	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Abose: New Patient Evaluation and Management   92031   Encounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   1   1   S418   S418   S418   1	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abase: New Parient Evaluation and Management   99204   Per Hour   0   0   50   50   50   0	New Patient Evaluation and Management		99204		Encounter	1	1	\$418	\$418	\$418	1
New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 Substance Abuse: New Parient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 0 Sachstance Abuse: New Parient Evaluation and Management 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Autism 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 50 0 Sacsiment for Autism 99213 U5 Encounter 108 334 \$51,833 \$480 \$51,53 3 Saksonement for Autism 99213 U5 Encounter 108 334 \$51,833 \$480 \$51,53 3 Saksonement for Autism 99214 U5 Encounter 108 334 \$51,833 \$480 \$51,53 3 Saksonement for Autism 99214 U5 Encounter 108 334 \$51,833 \$480 \$51,53 3 Saksonement for Autism 99214 U5 Encounter 0 0 0 50 50 50 50 0 Sacsonement for Autism 99214 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   6   6   \$609   \$102   \$102   1	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   0	Established Patient Evaluation and Management		99212		Encounter	6	6	\$609	\$102	\$102	1
Assessment for Autism   99213   U5   Encounter   0   0   0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   U5   15 Minutes   0   0   S0   S0   S0   0	Established Patient Evaluation and Management		99213		Encounter	108	334	\$51,833	\$480	\$155	3
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management         99215         15 Minutes         1         1         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$395         \$30         \$0	Established Patient Evaluation and Management		99214		15 Minutes	43	108	\$26,343	\$613	\$244	3
Assessment for Autism         99215         U5         15 Minutes         0         0         50         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         \$0         0           Additional Codes-Physician Services         99222         15 Minutes         0         0         50         50         \$0         0           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	1	1	\$395	\$395	\$395	1
Additional Codes-Physician Services         99222         15 Minutes         0         0         \$	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         \$	Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99225         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99226         15 Minutes         0         0         50         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99231         15 Minutes         0         0         50         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         0         0         \$	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         0         0         50         \$0         \$0         0           Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99231</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Service Category         Revenue Code         HCPCS Code         Modifier         Measure         Cases         Units         Cost           Assessment for Autism         99325         U5         15 Minutes         0         0         \$0           Assessment for Autism         99326         U5         15 Minutes         0         0         \$0           Assessment for Autism         99327         U5         30 Minutes         0         0         \$0           Assessment for Autism         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment for Autism         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment for Autism         99335         Encounter         0         0         \$0           Assessment for Autism         99335         Encounter         0         0         \$0	SO S	Cost/Unit  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	Unit/Case  0  0  0  0  0  0  0  0  0  0  0  0  0
Assessment         99326         15 minutes         0         0         \$0           Assessment for Autism         99326         U5         15 Minutes         0         0         \$0           Assessment         99327         15 Minutes         0         0         \$0           Assessment for Autism         99327         U5         30 Minutes         0         0         \$0           Assessment for Autism         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment for Autism         99334         Encounter         0         0         \$0           Assessment for Autism         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	0 0 0 0 0 0 0
Assessment for Autism         99326         U5         15 Minutes         0         0         50           Assessment         99327         15 Minutes         0         0         50           Assessment for Autism         99327         U5         30 Minutes         0         0         \$0           Assessment         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	0 0 0 0 0 0
Assessment         99327         15 Minutes         0         0         50           Assessment for Autism         99327         U5         30 Minutes         0         0         \$0           Assessment         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	0 0 0 0 0
Assessment for Autism         99327         U5         30 Minutes         0         0         \$0           Assessment         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0	0 0 0 0
Assessment         99328         Encounter         0         0         \$0           Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0	0 0 0
Assessment for Autism         99328         U5         Encounter         0         0         \$0           Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0	0 0
Assessment         99334         Encounter         0         0         \$0           Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0 \$0	\$0 \$0 \$0	0
Assessment for Autism         99334         U5         Encounter         0         0         \$0           Assessment         99335         Encounter         0         0         \$0	\$0 \$0 \$0	\$0 \$0	0
Assessment 99335 Encounter 0 0 \$0	\$0 \$0	\$0	
	\$0		0
Assessment for Autism 99335 U5 Encounter 0 0 \$0		\$0	
	\$0		0
Assessment 99336 Encounter 0 0 \$0		\$0	0
Assessment for Autism 99336 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99337 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99337 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99341 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99341 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99342 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99343 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99344 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99345 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99347 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99347 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99348 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99348 U5 Encounter 0 0 \$0	\$0	\$0	0
Assessment 99349 Encounter 0 0 \$0	\$0	\$0	0
Assessment for Autism 99349 U5 30 Minutes 0 0 \$0	\$0	\$0	0
Assessment 99350 50 Minutes 0 0 \$0	\$0	\$0	0
Assessment for Autism 99350 U5 70 Minutes 0 0 \$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	\$0	\$0	0
Substance Abuse: Transportation A0100 Encounter 0 0 \$0	\$0	\$0	0
Transportation A0110 Encounter 0 0 \$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0	\$0	\$0	0

Sanilac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	139	151	\$56,139	\$404	\$372	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	82	90	\$24,621	\$300	\$274	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	19	24	\$3,589	\$189	\$150	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	38	3,992	\$159,416	\$4,195	\$40	105
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Secretary   Secr	Sanilac				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Region   1901   1902   1903   190	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Peer Person and Operated Support Services   18066   Excessorier   0   0   99   99   90   0   0   0   0	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selection Above: Community   18008   18009	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Frammer Plan Perior   Premier Plan	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Publishes   Publ	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehinson Treatment Plan Rosies - Monitoring Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Compression Medication Services - EBP only   H2010   Executary   0   0   50   50   50   50   0   Citical Intervention   H2011   Executary   11   51   55,017   5338   5116   55   Still Hindling and Our of Home Non-Vocational Habilitation   H2014   Executater   1   8   551   551   56   58   Still Hindling and Our of Home Non-Vocational Habilitation   H2015   Executater   1   8   551   551   56   58   Communal Living Supports (Tably)   H2016   Executater   0   0   0   50   50   50   0   Communal Living Supports (Dably)   H2016   TF   B Matties   0   0   50   50   50   50   0   Communal Living Supports (Dably)   H2016   TF   B Matties   0   0   50   50   50   50   0   Debrio Services   H2019   Fe runk   0   0   50   50   50   50   50   0   Debrio Services   H2019   U5   Per one-way trip   0   0   50   50   50   50   50   50	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Cinia Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Scale-Building and Ott of Hone Non Vocational Habilitation   H2014   Encounter   0   0   50   50   50   50   50   50	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Examinary Living Supports (Dally)	Crisis Intervention		H2011		Encounter	11	51	\$5,917	\$538	\$116	5
Community-Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	1	8	\$51	\$51	\$6	8
Community Living Supports (Doily)   H2016   TG   Per mile   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound   H2021	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Management (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Minaparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0919   H2030   Refer to code descriptions.   0   0   50   50   50   50   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least of 0915, 0916, 0919   H2036   Encounter Session at least of 0915, 0916, 0919   H2036   Encounter Session at least of 0915, 0916, 0919   H2036   Encounter Session at least of 0915, 0916, 0919   H2036   Encounter Session at least of 0915, 0916, 0919   H2036	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0905, 0916, 0919   H2036   Encounter Session at least 45 min   1   1   1   1   1   1   1   1   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         1         \$63	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	1	\$63	\$63	\$63	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         SS 110         Encounter         0         0         \$10         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         17         29         \$5,643         \$332         \$195         2           Family Training         \$5111         HA         Days         0         0         \$0<	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training		S5111		Days	17	29	\$5,643	\$332	\$195	2
Family Training S5111 HM Days 0 0 \$0 \$0 \$0 0	Family Training		S5111	НА		0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# se SUB-ELEMENT COST REPORT: Fiscal Year 2014

Sanilac			Unit						
Service Category	Revenue Code HCPCS C	ode Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care	S5145		Days	0	0	\$0	\$0	\$0	0
Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Respite	S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services	T1002		15 Minutes	179	623	\$47,814	\$267	\$77	3
Respite Care	T1005		Encounter	25	7,406	\$27,841	\$1,114	\$4	296
Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	3	3,699	\$7,006	\$2,335	\$2	1,233
Substance Abuse: Child Sitting Services	T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1016		Per Diem	119	1,314	\$124,916	\$1,050	\$95	11
Targeted Case Management	T1017		Per Diem	3	47	\$2,013	\$671	\$43	16
Nursing Home Mental Health Monitoring	T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1023		15 Minutes	35	41	\$29,589	\$845	\$722	1
Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1999		Days	2	2	\$145	\$73	\$73	1
Transportation	T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Sanilac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	3	32	\$4,322	\$1,441	\$135	11
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	1	1	\$254	\$254	\$254	1
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other	<u> </u>			Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					231		\$1,046,425			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

New Standard Section   New Standard Section	Shiawassee				Unit						
Deal Nomini Riccustion Tracistics - Imparited CHOMIN PTRS   100	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	State Psychiatric Hospital - Inpatient PT22			PT22	Days	1	9	\$2,403	\$2,403	\$267	9
Carl Popular Manuel Community PT73   Digo   1918   Digo   21   270   ST06,200   SE-20   270   SE-20   SE-20	State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Page   18   19   19   19   19   19   19   19	Local Psychiatric Hospital/IMD PT68			PT68	Days	6	45	\$34,229	\$5,705	\$761	8
	Local Psychiatric Hospital - Acute Community PT73			PT73	Days	21	230	\$176,230	\$8,392	\$766	11
	Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Experient Hispail Ascillary Services - Aberical Singuiged Singuiged Singuiged Singuiged Singuiged Hospail Ascillary Services - Endosory   1000,0002,0005 0007   1000   1	Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Pagisizer Hospital Ascillary Services - Lalouriusry   0300-0302, 0305-0307   0   0   0   0   50   30   30   0     Equitizer Hospital Ascillary Services - Radology   0250   0   0   0   0   0   0   0   0   0	Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Imputient Hospital Ancillary Services - Radiology		0270-0272			Days	0	0	\$0	\$0	\$0	0
Section   Comparison   Compar	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Equation Hospital Ancillary Services - Respiratory Services   Out	Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Occupational Therapy   0420-0424	ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Papelient Hospital Ancillary Services - Speech-Language   0440-0444   # of treatments   0   0   0   50   50   50   0   0   0	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				0	0	\$0	\$0	\$0	0
Pathology   Path	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Pulmonary Function   0460		0440-0444			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance   0610-0611	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy   0636	Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	0	0	\$0	\$0	\$0	0
ECT Recovery Room   0710		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EKG/ECG   0730-0731	Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care   0762   # of tests   0   0   50   50   50   50   0	Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge   0901	Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Psychiatric/Psychological Partial Hospital Ancillary Services - Psychiatric/Psychological O911, 0914-0919	Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Compatient Partial Hospitalization   O912   Encounter   1   5   \$2,567   \$2,567   \$513   5	Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization         0913         # of visits         0         0         \$0	Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services				Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services   0925   Days   0   0   50   \$0   \$0   \$0   \$0   Inpatient Hospital Ancillary Services - Other Therapeutic   0940-0942   Days   0   0   0   \$0   \$0   \$0   \$0   \$0	Outpatient Partial Hospitalization	0912			Encounter	1	5	\$2,567	\$2,567	\$513	5
Inpatient Hospital Ancillary Services - Other Therapeutic Services   Days   D	Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Services           Additional Codes-ECT Anesthesia         00104         # of tests         0         0         \$0	Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia         0901         00104         # of visits         0         0         \$0		0940-0942			Days	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80100         Minutes         0         0         \$	Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only         80101         Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
	Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code         90785         Per Screen         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
	Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Assessment for Autism Assessment Assessment for Autism Assessment Assessment Assessment for Autism Mental Health: Outpatient Care	P900, 0906, 0914, 1915, 0916, 0919	HCPCS Code 90785 90791 90791 90792 90792 90832 90832	Modifier U5 U5 U5	Measure Per Screen  Encounter Encounter	Cases 0 92 0 2	Units 0 92 0	Cost \$0 \$39,569 \$0	\$0 \$430	Cost/Unit \$0 \$430	Unit/Case  0 1
Assessment Assessment for Autism Assessment Assessment for Autism Mental Health: Outpatient Care		90791 90791 90792 90792 90832	U5	Encounter	92 0	92	\$39,569	\$430	\$430	
Assessment for Autism Assessment Assessment for Autism Mental Health: Outpatient Care		90791 90792 90792 90832			0					1
Assessment Assessment for Autism Mental Health: Outpatient Care		90792 90792 90832				0	\$0			
Assessment for Autism  Mental Health: Outpatient Care		90792 90832	U5		2		ΨΟ	\$0	\$0	0
Mental Health: Outpatient Care		90832	U5	Encounter	-	2	\$460	\$230	\$230	1
					0	0	\$0	\$0	\$0	0
		90832		Encounter	81	265	\$36,996	\$457	\$140	3
				Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	99	442	\$48,021	\$485	\$109	4
	1900, 0906, 0914, 1915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	74	224	\$33,299	\$450	\$149	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	17	33	\$9,629	\$566	\$292	2
	9900, 0906, 0914, 1915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	114	624	\$167,373	\$1,468	\$268	5
	900, 0906, 0914, 1915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	900, 0906, 0914, 915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	1	5	\$148	\$148	\$30	5
	900, 0906, 0914, 1915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician 09	901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# tional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Shiawassee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97003		Encounter	35	35	\$14,293	\$408	\$408	1
Occupational Therapy		97004		Encounter	2	2	\$372	\$186	\$186	1
Occupational or Physical Therapy		97110		Encounter	6	31	\$1,653	\$275	\$53	5
Occupational or Physical Therapy		97112		Encounter	5	17	\$991	\$198	\$58	3
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	23	762	\$40,147	\$1,746	\$53	33
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	24	457	\$24,407	\$1,017	\$53	19
Occupational or Physical Therapy		97535		Encounter	7	49	\$2,911	\$416	\$59	7
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	· · · · · · · · · · · · · · · · · · ·	97760	·	Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Processing Services   Processing Services	Shiawassee				Unit						
Assertance   Albanic Services   97800   Each Authorises   97800   Ea	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97804   Real-Additional IS   0   0   30   30   50   10   10   10   10   10   10   1	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Solumer Abase: Augmenter	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Deletance Abne. Aspective   9781   Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
No. Places Foundation and Management   99,001   16   16   16   17   17   18   18   19   19   19   19   19   19	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parkent Endoation and Management   99201   U5   Hour   0   0   50   50   50   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Pasient Fishalation and Management   99201	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Antision	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Armer: New Pairent Evaluation and Management   99.01   Excounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99204   Per Hour   0   0   50   50   50   50   0   0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Parient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   S0   S0	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 0 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abase: New Patient Evaluation and Management   99205   Flour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Seesement for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0   Established Patient Evaluation and Management   99214   15 Minutes   48   84   \$13,287   \$277   \$158   2   2   2   2   2   2   2   2   2	Established Patient Evaluation and Management		99212		Encounter	83	255	\$15,790	\$190	\$62	3
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	58	119	\$13,522	\$233	\$114	2
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Stabilished Patient Evaluation and Management   99215   15 Minutes   5   7   \$1,566   \$313   \$224   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	48	84	\$13,287	\$277	\$158	2
Assessment for Autism         99215         U5         15 Minutes         0         0         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99222         15 Minutes         14         18         \$2,351         \$168         \$131         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	5	7	\$1,566	\$313	\$224	1
Additional Codes-Physician Services         99222         15 Minutes         14         18         \$2,351         \$168         \$131         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         \$0	Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99224         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	14	18	\$2,351	\$168	\$131	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         50         50         50         0           Additional Codes-Physician Services         99231         15 Minutes         2         5         \$196         \$98         \$39         3           Additional Codes-Physician Services         99232         15 Minutes         12         110         \$7,894         \$658         \$72         9           Additional Codes-Physician Services         99233         15 Minutes         16         64         \$5,988         \$374         \$94         4           Assessment         99324         15 Minutes         0         0         \$0<	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         2         5         \$196         \$98         \$39         3           Additional Codes-Physician Services         99232         15 Minutes         12         110         \$7,894         \$658         \$72         9           Additional Codes-Physician Services         99233         15 Minutes         16         64         \$5,988         \$374         \$94         4           Assessment         99324         15 Minutes         0         0         \$0<	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         12         110         \$7,894         \$658         \$72         9           Additional Codes-Physician Services         99233         15 Minutes         16         64         \$5,988         \$374         \$94         4           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9923         15 Minutes         16         64         \$5,988         \$374         \$94         4           Assessment         99324         15 Minutes         0         0         \$0 <t< td=""><td>Additional Codes-Physician Services</td><td></td><td>99231</td><td></td><td>15 Minutes</td><td>2</td><td>5</td><td>\$196</td><td>\$98</td><td>\$39</td><td>3</td></t<>	Additional Codes-Physician Services		99231		15 Minutes	2	5	\$196	\$98	\$39	3
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>12</td> <td>110</td> <td>\$7,894</td> <td>\$658</td> <td>\$72</td> <td>9</td>	Additional Codes-Physician Services		99232		15 Minutes	12	110	\$7,894	\$658	\$72	9
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Additional Codes-Physician Services		99233		15 Minutes	16	64	\$5,988	\$374	\$94	4
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Shiawassee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Shiawassee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	6	194	\$62,374	\$10,396	\$322	32
Assessment for Autism		H0031	U5	Encounter	3	3	\$1,043	\$348	\$348	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	133	140	\$24,477	\$184	\$175	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	7	7	\$999	\$143	\$143	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	81	8,257	\$630,138	\$7,779	\$76	102
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	1	10	\$335	\$335	\$33	10
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Shiawassee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	1	8	\$1,067	\$1,067	\$133	8
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	5	13	\$3,297	\$659	\$254	3
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	4	16	\$4,730	\$1,183	\$296	4
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	36	202	\$22,894	\$636	\$113	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	29	6,284	\$51,971	\$1,792	\$8	217
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	1	8	\$437	\$437	\$55	8
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	2	160	\$8,741	\$4,370	\$55	80
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	10	475	\$36,688	\$3,669	\$77	48
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	2	23	\$1,260	\$630	\$55	12
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	43	332	\$103,759	\$2,413	\$313	8
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0

Professor   Prof	Shiawassee			Unit						
Note   15145   Doys   0   0   59   59   59   50   0   59   59	Service Category	Revenue Code HCPCS Co	de Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Regine	Foster Care	S5140		Days	0	0	\$0	\$0	\$0	0
Regint   SSSSI	Foster Care	S5145		Days	0	0	\$0	\$0	\$0	0
Personal Emergence (Regioner (Stepter (PESS)   \$15/4   Encounter   0   0   9/1   \$9/	Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Personal Energency Response (Personal Response (Personal Response) Response) Response (Personal Response (Personal Response) Respo	Respite	S5151		Encounter	0	0	\$0	\$0	\$0	0
Exercise Model Engineers Supplies   S1165   Face to Pace Contact   0   0   0   50   50   50   50   0	Personal Emergency Response System (PERS)	S5160		Encounter	0	0	\$0	\$0	\$0	0
Edition   Medical Equipment Supplies   S1199   Per Service   0   0   50   50   50   50   0   0   0	Personal Emergency Response System (PERS)	S5161		Encounter	0	0	\$0	\$0	\$0	0
	Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Heath Services	Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Health Services	Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services   S8470	Health Services	S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Presention Services - Diecet Model	Health Services	S9446		15 minutes	0	0	\$0	\$0	\$0	0
Price Strick Sishbilization Emrolled Program	Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Per diem   10	Prevention Services - Direct Model	S9482			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board   S9976   Days   O   O   S0   S0   S0   S0   O	Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Privace Duty Narising	Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Private Dary Narsing	Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Dury Nursing	Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Assessment   T1001	Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Health Services	Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	Assessment	T1001		Encounter	17	17	\$5,897	\$347	\$347	1
Respite Care   T1005   TD   Encounter   0   0   50   50   50   50   0	Health Services	T1002		15 Minutes	17	21	\$1,952	\$115	\$93	1
Respite Care         T1005         TE         15 minutes         0         0         80         80         80         0           Respite Care (Children's Waiver' & SED Waiver)         T1005         TT         15 Minutes         0         0         80         80         80         0           Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         50         50         50         0           Substance Abuse: Recovery Sport Services         T1012         15 Minutes         0         0         50         50         50         0           Substance Abuse: Recovery Sport Services         T1015         Per Diem         0         0         50         50         50         0           Supports Coordination/Wrap Facilitation         T1016         Per Diem         0         0         50         50         50         0           Supports Coordination/Wrap Facilitation         T1017         Per Diem         27         543         \$51,655         \$2,358         \$105         22           Targeted Case Management         T1017         SE         15 Minutes         0         0         50         50         50         0           Personal Care in Licensed Specializ	Respite Care	T1005		Encounter	50	8,306	\$46,938	\$939	\$6	166
Respite Care (Children's Waiver & SED Waiver)   T105   TT   15 Minutes   0   0   S0   S0   S0   S0   O	Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services         T1009         15 minutes         0         0         50         50         50         0           Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         \$0	Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services         T1012         15 Minutes         0         0         80         80         80         0           Family Psycho-Education - EBP         T1015         Per Diem         0         0         \$0	Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP         T1015         Per Diem         0         0         80         80         80         20           Supports Coordination/Wrap Facilitation         T1016         Per Diem         22         493         \$51,865         \$2,358         \$105         22           Targeted Case Management         T1017         Per Diem         27         543         \$56,541         \$2,094         \$104         20           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         \$0	Substance Abuse: Child Sitting Services	T1009		15 minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation         T1016         Per Diem         22         493         \$51,865         \$2,358         \$105         22           Targeted Case Management         T1017         Per Diem         27         543         \$56,541         \$2,094         \$104         20           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0	Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Targeted Case Management         T1017         Per Diem         27         543         \$56,541         \$2,094         \$104         20           Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         50         \$0         <	Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0 <th< td=""><td>Supports Coordination/Wrap Facilitation</td><td>T1016</td><td></td><td>Per Diem</td><td>22</td><td>493</td><td>\$51,865</td><td>\$2,358</td><td>\$105</td><td>22</td></th<>	Supports Coordination/Wrap Facilitation	T1016		Per Diem	22	493	\$51,865	\$2,358	\$105	22
Personal Care in Licensed Specialized Residential Setting         T1020         15 Minutes         0         0         \$0 <th< td=""><td>Targeted Case Management</td><td>T1017</td><td></td><td>Per Diem</td><td>27</td><td>543</td><td>\$56,541</td><td>\$2,094</td><td>\$104</td><td>20</td></th<>	Targeted Case Management	T1017		Per Diem	27	543	\$56,541	\$2,094	\$104	20
Personal Care in Licensed Specialized Residential Setting         T1020         TF         15 Minutes         0         0         \$0 <th< td=""><td>Nursing Home Mental Health Monitoring</td><td>T1017</td><td>SE</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Nursing Home Mental Health Monitoring	T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting         T1020         TG         Days         0         0         \$0 <td>Personal Care in Licensed Specialized Residential Setting</td> <td>T1020</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Personal Care in Licensed Specialized Residential Setting	T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments         T1023         15 Minutes         70         98         \$64,883         \$927         \$662         1           Prevention Services - Direct Model         T1027         Days         0         0         \$	Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model         T1027         Days         0         0         \$0	Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy         T1999         Days         0         0         \$0 <td>Assessments</td> <td>T1023</td> <td></td> <td>15 Minutes</td> <td>70</td> <td>98</td> <td>\$64,883</td> <td>\$927</td> <td>\$662</td> <td>1</td>	Assessments	T1023		15 Minutes	70	98	\$64,883	\$927	\$662	1
Transportation         T2001         15 minutes         0         0         \$0	Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2001         15 Minutes         0         0         \$0	Enhanced Medical Supplies or Pharmacy	T1999		Days	0	0	\$0	\$0	\$0	0
Transportation T2002 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Transportation	T2001		15 minutes	0	0			\$0	0
	Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0         \$0         0	Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Shiawassee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	2	9	\$1,155	\$578	\$128	5
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					378		\$1,879,734			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	11	351	\$182,018	\$16,547	\$519	32
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	85	824	\$432,814	\$5,092	\$525	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4	21	\$13,471	\$3,368	\$641	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	07			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	26	169	\$90,792	\$3,492	\$537	7
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	1	1	\$11	\$11	\$11	1

St. Clair		wanaa a .		Unit		** .		aa		** ***
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			4	4	\$1,995	\$499	\$499	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	127	130	\$56,943	\$448	\$438	1
Assessment for Autism		90792	U5	Encounter	3	3	\$2,136	\$712	\$712	1
Mental Health: Outpatient Care		90832		Encounter	127	521	\$63,494	\$500	\$122	4
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	229	1,110	\$186,369	\$814	\$168	5
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	197	1,723	\$280,194	\$1,422	\$163	9
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	3	3	\$648	\$216	\$216	1
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	60	124	\$21,794	\$363	\$176	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	237	1,262	\$228,725	\$965	\$181	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	47	612	\$67,406	\$1,434	\$110	13
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Personal P	St. Clair				Unit						
Speech A. Language Therapy	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special European Theory	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Seconds A company   19200	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCHIPTYS   96911   Becoment 45-90 Min   0   0   90   30   37   7	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Accounter for Authin	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Tendag by Technician	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Mesengener for Authors   95/102   U5   30 Minutes   0   0   35   30   30   30   30   30	Assessment for Autism		96101	U5	Encounter 75-80 Min	1	2	\$355	\$355	\$177	2
Psychological Testing by Comp	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment-Other 9610 30 Minutes 0 0 30 50 50 50 0 0 Assessment-Other 96110 30 Minutes 0 0 0 30 50 50 50 0 0 Assessment-Other 96111 4 Minutes 0 0 0 50 50 50 50 0 0 Norrobehavieral Statute Exam 96116 4 Minutes 0 0 0 0 50 50 50 50 50 0 Norrobehavieral Statute Exam 96116 4 Minutes 0 0 0 0 50 50 50 50 50 0 0 Norrobehavieral Statute Exam 96118 4 Minutes 0 0 0 50 50 50 50 50 50 0 0 Assessment for Authism 96118 US 4 Minutes 0 0 0 50 50 50 50 50 0 0 Assessment for Authism 96118 US 4 Minutes 0 0 0 50 50 50 50 50 50 0 0 Assessment for Authism 96118 US 6 Minutes 0 0 0 50 50 50 50 50 0 0 0 0 50 50 50 5	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assuments-Other 96110 NO Minutes 0 0 0 50 50 50 50 0 0 Assuments-Other 96111 4 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9616 4 4 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9616 4 4 Minutes 0 0 0 0 50 50 50 50 0 Norman-Anterior Status Essum 9618 4 Minutes 0 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9618 4 Minutes 0 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9618 U5 4 Minutes 0 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9618 U5 4 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Norman-Anterior Status Essum 9619 U5	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Other   Set111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropechavisarial Status Exam	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Nempych teal by PsychPfrys   96118	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism   96118   U5   45 Minutes   0   0   30   30   30   30   0     Neuropsych tesl by Tech   96119   U5   60 Minutes   0   0   0   30   30   30   0     Neuropsych tesl by Tech   96119   U5   60 Minutes   0   0   0   30   30   30   0     Neuropsych tesl Admin w Comp   96120   U5   60 Minutes   0   0   30   30   30   0     Neuropsych tesl Admin w Comp   96120   U5   60 Minutes   0   0   30   30   30   0     McGardion Administration   96372   60 Minutes   1   1   579   579   579   579   10     McGardion Administration   96372   60 Minutes   1   1   5   50   50   50   0     Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   0     Physical Therapy   97002   Each Addinivad 30   0   0   50   50   50   0     Physical Therapy   97003   Encounter   1   1   5   50   50   50   0     Occupational Therapy   97004   Encounter   0   0   50   50   50   0     Occupational Therapy   97104   Encounter   0   0   50   50   50   0     Occupational Or Physical Therapy   97112   Encounter   0   0   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   0     Occupational Or Physical Therapy   97140   Encounter   0   0   50   50   50   0     Occupational Or Physical Therapy   97150   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9750   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational Or Physical Therapy   9755   Encounter   0   0   50   50   50	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech   96119   60 Minutes   0   0   50   50   50   0   0	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
New Seasement for Autism   96119   U5   60 Minutes   0   0   50   50   50   0     New Seasement for Autism   96120   60 Minutes   0   0   50   50   50   0     New Seasement for Autism   96372   60 Minutes   1   1   570   579   579   1     Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50     Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50     Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50     Physical Therapy   97003   Encounter   1   1   \$430   \$430   \$430   \$10     Occupational Therapy   97004   Encounter   0   0   50   50   50   50   0     Occupational Therapy   97014   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97112   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97113   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97150   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   97150   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9753   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9754   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9754   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9755   Encounter   0   0   50   50   50   50     Occupational or Physical Therapy   9755   Encounter   0   0   50   50   50   5	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w Comp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0   0   0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   50   0	Medication Administration		96372		60 Minutes	1	1	\$79	\$79	\$79	1
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97114         Encounter         0         0         S0	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97112         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97113         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97114         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97140         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97150         Encounter         0         0         80         80         80         80         0           Occupational or Physical Therapy         97530         Encounter         1         4         \$283         \$283         \$71         4           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational Therapy		97003		Encounter	1	1	\$430	\$430	\$430	1
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97116         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97124         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97140         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97150         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97530         Encounter         1         4         5283         5283         571         4           Occupational or Physical Therapy         97532         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97533         Encounter         0         0         80         80         80         0           Occupational or Physical Therapy         97535         Encounter         0         0	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97124         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97140         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97150         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97530         Encounter         1         4         \$283         \$283         \$71         4           Occupational or Physical Therapy         97532         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97533         Encounter         1         4         \$291         \$291         \$73         4           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0<	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         50         50         50         0           Occupational or Physical Therapy         97530         Encounter         1         4         \$283         \$283         \$283         \$71         4           Occupational or Physical Therapy         97532         Encounter         0         0         50         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         1         4         \$283         \$283         \$71         4           Occupational or Physical Therapy         97532         Encounter         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         1         4         \$291         \$291         \$73         4           Occupational or Physical Therapy         97535         Encounter         0         0         \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>1</td> <td>4</td> <td>\$283</td> <td>\$283</td> <td>\$71</td> <td>4</td>	Occupational or Physical Therapy		97530		Encounter	1	4	\$283	\$283	\$71	4
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>1</td> <td>4</td> <td>\$291</td> <td>\$291</td> <td>\$73</td> <td>4</td>	Occupational or Physical Therapy		97533		Encounter	1	4	\$291	\$291	\$73	4
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	1	1	\$251	\$251	\$251	1
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	33	62	\$10,200	\$309	\$165	2
Assessment for Autism		99213	U5	Encounter	1	1	\$148	\$148	\$148	1
Established Patient Evaluation and Management		99214		15 Minutes	230	784	\$192,989	\$839	\$246	3
Assessment for Autism		99214	U5	15 Minutes	5	5	\$1,524	\$305	\$305	1
Established Patient Evaluation and Management		99215		15 Minutes	17	44	\$8,210	\$483	\$187	3
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	1	3	\$5,103	\$5,103	\$1,701	3
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	4	80	\$12,736	\$3,184	\$159	20
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	357	458	\$191,980	\$538	\$419	1
Assessment for Autism		H0031	U5	Encounter	3	3	\$892	\$297	\$297	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	141	223	\$69,922	\$496	\$314	2
Monitoring of Treatment - Clinician		H0032	TS	Encounter	81	143	\$26,957	\$333	\$189	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	149	38,244	\$1,430,708	\$9,602	\$37	257
Home Based Services		H0036	ST	Encounter	7	93	\$6,699	\$957	\$72	13
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	16	63	\$5,927	\$370	\$94	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	67	7,953	\$43,901	\$655	\$6	119
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	2	730	\$109,595	\$54,797	\$150	365
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	1	263	\$19,625	\$19,625	\$75	263
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	8	452	\$81,383	\$10,173	\$180	57
Wraparound (SED Waiver)		H2022		Per one-way trip	7	141	\$69,215	\$9,888	\$491	20
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	1	25	\$3,011	\$3,011	\$120	25
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	82	347	\$78,717	\$960	\$227	4
Family Training Family Training		S5111 S5111	НА	Days Days	82 0	347 0	\$78,717 \$0	\$960 \$0	\$227 \$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Clair			Unit						
Service Category	Revenue Code HCPCS Co	de Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care	S5145		Days	0	0	\$0	\$0	\$0	0
Respite	S5150		Days	0	0	\$0	\$0	\$0	0
Respite	S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S9482			12	490	\$33,570	\$2,797	\$69	41
Intensive Crisis Stabilization-Enrolled Program	S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services	T1002		15 Minutes	4	23	\$1,618	\$405	\$70	6
Respite Care	T1005		Encounter	30	8,593	\$44,082	\$1,469	\$5	286
Respite Care	T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T1005	TT	15 Minutes	5	360	\$900	\$180	\$3	72
Substance Abuse: Child Sitting Services	T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T1016		Per Diem	238	5,751	\$693,628	\$2,914	\$121	24
Targeted Case Management	T1017		Per Diem	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		15 Minutes	2	730	\$14,520	\$7,260	\$20	365
Personal Care in Licensed Specialized Residential Setting	T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T1023		15 Minutes	30	31	\$4,915	\$164	\$159	1
Prevention Services - Direct Model	T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T1999		Days	0	0	\$0	\$0	\$0	0
Transportation	T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T2002		15 Minutes	0	0	\$0	\$0	\$0	0

St. Clair				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	3	13	\$842	\$281	\$65	4
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					620		\$4,830,067			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Joseph				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	142	\$31,666	\$15,833	\$223	71
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	3	40	\$24,370	\$8,123	\$609	13
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	12	64	\$38,464	\$3,205	\$601	5
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	17			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	1	2	\$741	\$741	\$370	2
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Name	St. Joseph				Unit						
Assessment   1971   15   10   0   15   15   10   0   15   10   10	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Asserment 16 Austrian 90791 US Decounter 54 54 54 97276 5164 5184 0.0 Asserment 16 Austrian 90702 US Encounter 54 51 54 97276 5164 5184 0.0 Asserment 16 Austrian 90702 US Encounter 6 41 188 5153-54 5181 580 0.0 Asserment 6 Austrian 90702 US Encounter 6 41 188 5153-54 5181 580 0.0 Asserment 6 Austrian 9080, 9080, 908, 908 519 0.0 Asserment 6 9080, 9080, 908, 908 519 0.0 Asserment 6 Austrian 9080, 908, 908 19 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Montaneer   90792   Encounter   54   54   57,758   5144   5144   1	Assessment		90791			0	0	\$0	\$0	\$0	0
Secondary for Autism	Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
	Assessment		90792		Encounter	54	54	\$7,756	\$144	\$144	1
Substance above: Outputient Cure   0900, 1900,	Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Macissanian   Milk	Mental Health: Outpatient Care		90832		Encounter	84	198	\$13,554	\$161	\$68	2
Assessment for Antism	Substance abuse: Outpatient Care		90832		Encounter	1	1	\$62	\$62	\$62	1
Menial Health Charpatient Care   900,000,000,0014,   90844   Excounter   178   1,083   \$161,618   \$9918   \$1,194   0   \$1,000,000,000,0014,   90844   Excounter   178   1,083   \$161,618   \$9918   \$1,194   2   \$2,000,000,000,0014,   90845   Excounter 20-30 Min   0   0   0   50   \$30   \$30   0	Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Substance abuse: Outputient Care   6903, 6904, 6914, 6915, 6916, 6919   Facounter   1   2   \$5249   \$5249   \$5124   2	Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   9315,010,0919   90835   Eacounter 20-30 Min   0   0   30   50   50   50   0	Mental Health: Outpatient Care		90834		Encounter	178	1,083	\$161,618	\$908	\$149	6
Accounter for Autism   90836   U5   Encounter 20-30 Min   0   0   0   50   50   50   50   0	Substance abuse: Outpatient Care		90834		Encounter	1	2	\$249	\$249	\$124	2
Mental Health: Outputient Care	Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance abuse: Outpatient Care   90837   Encounter 25-30 Min   0   0   50   50   50   0   0	Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment   September   Sep	Mental Health: Outpatient Care		90837		Encounter 20-30 Min	26	48	\$16,514	\$635	\$344	2
Assessment for Autisin 90888 U5 Encounter 45-50 Min 0 0 50 \$0 \$0 \$0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes	Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes   90840   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy	Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915   90847   Encounter 75-80 Min   0   0   80   80   80   80   80   80	Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pherapy-Family Therapy   900, 900, 601, 44   90847   Encounter 75-80 Min   194   872   \$75.583   \$390   \$87   4   \$100, 900, 601, 401, 400, 900, 601, 901, 901, 901, 901, 901, 901, 901, 9	Therapy-Family Therapy		90846		Encounter 75-80 Min	104	364	\$32,083	\$308	\$88	4
Substance Abuse: Outpatient Treatment   0900, 0906, 0914, 0915, 0916, 0919   90849   Encounter 20-30 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Substance Abuse: Outpatient Treatment		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Description	Therapy-Family Therapy		90847		Encounter 75-80 Min	194	872	\$75,583	\$390	\$87	4
Therapy-Family Therapy	Substance Abuse: Outpatient Treatment		90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849         Encounter 20-30 Min         0         0         50         \$0 <t< td=""><td>Therapy-Family Therapy</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   9087   9087   Encounter 45-50 Min   0   0   0   50   50   50   50   0   0	Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853         Encounter 45-50 Min         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Treatment</td><td></td><td>90849</td><td></td><td>Encounter 20-30 Min</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Treatment		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)   90863   Encounter 45-50 Min   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Therapy-Group Therapy		90853		Encounter 20-30 Min	5	7	\$929	\$186	\$133	1
Additional Codes-ECT Physician         90870         Encounter 45-50 Min         0         0         \$0         <	Substance Abuse: Outpatient Treatment		90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician         0901         90870         Encounter 45-50 Min         0         0         \$0	Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other         90887         Encounter 75-80 Min         0         0         \$0	Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)         92506         Encounter 75-80 Min         0         0         \$0 <td>Additional Codes-ECT Physician</td> <td>0901</td> <td>90870</td> <td></td> <td>Encounter 45-50 Min</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92507         Encounter 75-80 Min         0         0         \$0	Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92508         Encounter 75-80 Min         0         0         \$0	Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92521         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy         92522         Encounter 20-30 Min         0         0         \$0	Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

St. Joseph				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	1	2	\$379	\$379	\$190	2
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	-	97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	-	97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

Name   Personal Per	St. Joseph				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seal Services   97894	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Submine Abse: Acquareture	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Selstance Abuse: Aspresseration of Management   97811   Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
New Places Foundamin and Management   99,700   U5   Hoer   0   0   50   50   50   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Parkers Evaluation and Management   97201   U5   Hener   0   0   93   50   50   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Foultation and Management   99201   Per Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Accountent for Authinn	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Subtrance Above: New Patient Evaluation and Management	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Parkent Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 Substance Abases: New Patient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 0 Sassingent for Autism 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sassingent Evaluation and Management 99212 Established Patient Evaluation and Management 99212 Established Patient Evaluation and Management 99212 U5 Encounter 0 0 0 50 50 50 50 0 Sassingent for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 0 Sassingent for Autism 99213 U5 Encounter 125 342 S88,314 S659 S241 3 Assessment for Autism 99213 U5 Encounter 125 342 S88,314 S659 S241 3 Assessment for Autism 99214 S1 Shimates 18 22 S65,22 S362 S266 1 Sassingent For Autism 99214 S1 Shimates 0 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   13   17   \$1,443   \$111   \$85   1	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   125   342   \$82,314   \$659   \$241   3     Assessment for Autism   99213   U5   Encounter   0   0   0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99212		Encounter	13	17	\$1,443	\$111	\$85	1
Assessment for Autism   99213   U5   Encounter   0   0   0   80   80   80   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Stablished Patient Evaluation and Management   99214   15 Minutes   18   22   \$6,522   \$362   \$296   1     Assessment for Autism   99214   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0     Established Patient Evaluation and Management   99215   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99213		Encounter	125	342	\$82,314	\$659	\$241	3
Assessment for Autism         99214         U5         15 Minutes         0         0         80         80         80         0           Established Patient Evaluation and Management         99215         15 Minutes         0         0         80         80         80         0           Assessment for Autism         99215         U5         15 Minutes         0         0         50         50         \$0         0           Additional Codes-Physician Services         99221         15 Minutes         5         5         \$451         \$90         \$90         1           Additional Codes-Physician Services         99222         15 Minutes         5         5         \$449         \$90         \$90         1           Additional Codes-Physician Services         99223         Encounter         2         2         \$179         \$90         \$90         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   0   0   50   50   50   0     Assessment for Autism   99215   U5   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99221   15 Minutes   5   5   5   5449   590   590   1     Additional Codes-Physician Services   99222   15 Minutes   5   5   5   5449   590   590   1     Additional Codes-Physician Services   99223   Encounter   2   2   5179   590   590   1     Additional Codes-Physician Services   99224   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99225   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99226   15 Minutes   0   0   50   50   50   0     Additional Codes-Physician Services   99231   15 Minutes   6   13   51,177   5196   591   2     Additional Codes-Physician Services   99232   15 Minutes   6   13   51,177   5196   591   2     Additional Codes-Physician Services   99233   15 Minutes   7   15   51,340   5191   589   2     Additional Codes-Physician Services   99234   15 Minutes   5   8   5712   5142   589   2     Additional Codes-Physician Services   9934   15 Minutes   5   8   5712   5142   589   2     Assessment   9934   15 Minutes   5   8   5712   5142   589   2     Assessment   9934   15 Minutes   0   0   50   50   50   50   50	Established Patient Evaluation and Management		99214		15 Minutes	18	22	\$6,522	\$362	\$296	1
Assessment for Autism         99215         U5         15 Minutes         0         0         50         \$0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         5         5         \$451         \$90         \$90         1           Additional Codes-Physician Services         99222         15 Minutes         5         5         \$449         \$90         \$90         1           Additional Codes-Physician Services         99223         Encounter         2         2         \$179         \$90         \$90         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99222         15 Minutes         5         5         \$449         \$90         \$90         1           Additional Codes-Physician Services         99223         Encounter         2         2         \$179         \$90         \$90         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         2         2         \$179         \$90         \$90         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0 <t< td=""><td>Additional Codes-Physician Services</td><td></td><td>99221</td><td></td><td>15 Minutes</td><td>5</td><td>5</td><td>\$451</td><td>\$90</td><td>\$90</td><td>1</td></t<>	Additional Codes-Physician Services		99221		15 Minutes	5	5	\$451	\$90	\$90	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	5	5	\$449	\$90	\$90	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99226         15 Minutes         0         0         50         \$	Additional Codes-Physician Services		99223		Encounter	2	2	\$179	\$90	\$90	1
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         6         13         \$1,177         \$196         \$91         2           Additional Codes-Physician Services         99232         15 Minutes         7         15         \$1,340         \$191         \$89         2           Additional Codes-Physician Services         99233         15 Minutes         5         8         \$712         \$142         \$89         2           Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99225</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         7         15         \$1,340         \$191         \$89         2           Additional Codes-Physician Services         99233         15 Minutes         5         8         \$712         \$142         \$89         2           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99233         15 Minutes         5         8         \$712         \$142         \$89         2           Assessment         99324         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	6	13	\$1,177	\$196	\$91	2
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>7</td> <td>15</td> <td>\$1,340</td> <td>\$191</td> <td>\$89</td> <td>2</td>	Additional Codes-Physician Services		99232		15 Minutes	7	15	\$1,340	\$191	\$89	2
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	5	8	\$712	\$142	\$89	2
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Service (Capter)         Recence for Aller (Capter)         Water (Day of Capter)         Comment (Day of Capt	St. Joseph				Unit						
Assessment   9426   1.5 minutes   0   0   93   50   50   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Asserment for Assirting	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Nonemer   9927	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Auditin	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment (x Aution 9732 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9732 US Executer 0 0 0 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 90 90 90 Assessment (x Aution 9736 US Executer 0 0 0 90 90 90 90 90 90 90 90 Assessment (x Aution 9737 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9737 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 90 Assessment (x Aution 9734 US Executer 0 0 0 90 90 90 90 90 90 90 90 90 90 90	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Audition	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment   Ass	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Accounter for Antains	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authun   99315	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9335 US Executier 0 0 0 SD 30 SD 50 SD 0 Assessment 9336 Executier 0 0 0 SD 50 SD 50 SD 0 Assessment 9337 Executier 0 0 0 SD 50 SD 50 SD 0 Assessment 93337 US Executier 0 0 0 SD 50 SD 50 SD 50 SD 0 Assessment Assessment 0 Assessment 0 SD 0 S	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authins	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audism	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 97337 US Incounter 0 0 0 50 50 50 50 0 Assessment for Autism 97337 US Incounter 0 0 0 50 50 50 50 0 Assessment for Autism 97341 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97341 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97342 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97349 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97349 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97349 US Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 97349 US Baccounter 0 0 0 50 50 50 50 0 Assessment for Autism 97349 US Baccounter 0 0 0 50 50 50 50 0 Assessment for Autism 97340 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 0 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 97340 US Baccounter 0 0 0 50 50 50 50 50 0 Assessment for Autism 0 0 0 50 50 50 50 50 0 Assessment	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austism 99337 US Incounter 0 0 0 50 50 50 50 0 0 Assessment for Austism 99341 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99343 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99340 US Thousand 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US TO Minutes 0 0 0 50 50 50 5	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 93541 US Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93542 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93543 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93544 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93544 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93544 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93544 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93544 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93545 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93547 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93547 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93547 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93548 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93548 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93549 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 50 0 Assessment For Aurism 93540 LE Encounter 0 0 0 50 50 50 50 50 0 Assessment For Aurism 1 0 0	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment of Autism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342 U5 Encounter 0 0 0 S0 S0 S0 S0 0 0 Assessment 99431 U5 Encounter 0 0 0 S0 S	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   50   50   50   0	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 Encounter 0 0 0 50 50 50 50 0 0 50 50 50 50 50 50	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99345   Encounter   0   0   0   S0   S0   S0   S0   0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         \$0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99347         Encounter         0         0         \$0	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment         99348         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         50 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment         99349         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0         0           Medication Management         99506         15 Minutes         0         0         50         50         50         50         0           Transportation	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         50         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         50         0           Assessment         99350         50 Minutes         0         0         50         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0100         35 Minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation <td< td=""><td>Assessment</td><td></td><td>99348</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></td<>	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         50         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50         50         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Transportation         A0100         35 Minutes         0         0         50         50         50         50         0           Substance Abuse: Transportation         A010         Encounter         0         0         50         50         50         50         0	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         50         50         50         0           Transportation         A0080         15 Minutes         0         0         50         50         50         50         0           Transportation         A0090         25 minutes         0         0         50         50         50         50         0           Transportation         A0100         Encounter         0         0         50         50         50         0           Transportation         A0110         Encounter         0         0         50         50         50         0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: TransportationA0110Encounter00\$0\$0\$0\$0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Joseph				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	1	1	\$292	\$292	\$292	1
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	21	357	\$49,933	\$2,378	\$140	17
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	245	255	\$167,877	\$685	\$658	1
Assessment for Autism		H0031	U5	Encounter	5	5	\$2,898	\$580	\$580	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	131	135	\$14,909	\$114	\$110	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	46	5,280	\$207,059	\$4,501	\$39	115
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	-	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Joseph	Revenue Code	HCPCS Code	Modifier	Unit	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Service Category	Revenue Code		Modiner	Measure						
Assertive Community Treatment (ACT)		H0039		Encounter	23	176	\$1,502	\$65	\$9	8
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	1	3	\$308	\$308	\$103	3
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	23	159	\$22,004	\$957	\$138	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	66	34,331	\$233,330	\$3,535	\$7	520
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	1	1	\$181	\$181	\$181	1
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	21	133	\$15,500	\$738	\$117	6
Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	HM	Days	19	183	\$14,458	\$761	\$79	10

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

St. Joseph Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0 \$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0 \$0	\$0	\$0 \$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
·		S5199		Per Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies  Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0 \$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482		13 Williates	0	0	\$0	\$0	\$0	0
- <del></del>		S9484		15 Minutes	4	33		\$326	\$40	8
Intensive Crisis Stabilization-Enrolled Program  Residential Room and Board		S9976		15 Minutes  Per diem	0	0	\$1,305 \$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
· <del></del>		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing  Private Duty Nursing		T1000	TE	Encounter Encounter	0	0	\$0	\$0	\$0 \$0	0
Assessment Assessment		T1000	16	Encounter	76	76	\$4,147	\$55	\$55	1
Health Services		T1001		15 Minutes	111	227	\$15,404	\$139	\$68	2
Respite Care		T1002		Encounter	6	2,932	\$13,404	\$1,947	\$4	489
· <del></del>		T1005	TD	Encounter	0	0	\$11,083	\$1,947	\$0	0
Respite Care Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
		T1003	- 11	15 minutes	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Substance Abuse: Child Sitting Services  Substance Abuse: Recovery Support Services		T1009		15 Minutes	0	0	\$0	\$0	\$0 \$0	0
Family Psycho-Education - EBP		T1012		Per Diem	0	0	\$0	\$0	\$0 \$0	0
·		T1015		Per Diem	2	3	\$156	\$78	\$52	2
Supports Coordination/Wrap Facilitation  Targeted Case Management		T1017		Per Diem	160	3,304	\$195,988	\$1,225	\$52 \$59	21
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$193,988	\$1,223	\$39 \$0	0
		T1017	3E	15 Minutes	0	0	\$0	\$0	\$0 \$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG		0	0	\$0	\$0	\$0 \$0	0
Personal Care in Licensed Specialized Residential Setting			16	Days 15 Minutes						1
Assessments  Provincian Services Direct Model		T1023		15 Minutes	21	23	\$25,413	\$1,210	\$1,105	
Prevention Services - Direct Model		T1027 T1999		Days	0	0	\$0 \$0	\$0 \$0	\$0	0
Enhanced Medical Supplies or Pharmacy  Transportation				Days 15 minutes	0	0	<u> </u>		\$0	0
Transportation		T2001		15 minutes	0		\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

St. Joseph				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·-	ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					479		\$1,482,900			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Summit Pointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	5	121	\$26,983	\$5,397	\$223	24
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	19	133	\$92,500	\$4,868	\$695	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	5	28	\$16,360	\$3,272	\$584	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Summit Pointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			71	71	\$12,972	\$183	\$183	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	161	161	\$56,210	\$349	\$349	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	36	39	\$4,985	\$138	\$128	1
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	341	1,124	\$226,244	\$663	\$201	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	193	569	\$137,348	\$712	\$241	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	9	16	\$3,221	\$358	\$201	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	176	660	\$143,310	\$814	\$217	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	7	41	\$6,183	\$883	\$151	6
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Special A Language Thanays	Summit Pointe				Unit	_		_			
Seach A. Lauguage Thomay   9234	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Seech & Lumques Therapy	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pechantical PSYCHIPINS	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Austrant   96/02   U5   30 Matures   0   0   30   30   30   30   30   30	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Peckelogical Texing by Comp   96103   30 Minutes   0   0   0   50   50   50   50   0   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	12	16	\$5,119	\$427	\$320	1
Ausseniers Other	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assencest-Other	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Accountered Other   9611	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Name	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychtest by PsychPhys   Assessment for Authins   96118   U5 45 Minutes   0	Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Antism    Secondary   Secon	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychical by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism Open	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Administration   96120   60 Minutes   0   0   50   50   50   50   0	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         \$0	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   50   50	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   0   50   50   50   50   50	Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Name	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Secupational Therapy   9704   Encounter   0   0   50   50   50   50   0	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO	Occupational Therapy		97003		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97113         Encounter         0         0         S0	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97110</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97112</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <			97542			0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97755</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
							0				0
					Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Summit Pointe				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	5	38	\$3,641	\$728	\$96	8
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	32	34	\$3,572	\$112	\$105	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	250	534	\$94,567	\$378	\$177	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	76	119	\$30,416	\$400	\$256	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	4	4	\$191	\$48	\$48	1
Additional Codes-Physician Services		99222		15 Minutes	1	1	\$73	\$73	\$73	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	4	8	\$464	\$116	\$58	2
Additional Codes-Physician Services		99232		15 Minutes	1	1	\$73	\$73	\$73	1
Additional Codes-Physician Services		99233		15 Minutes	2	2	\$147	\$73	\$73	1
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

Summit Pointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Summit Pointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	1	1	\$1,096	\$1,096	\$1,096	1
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	114	115	\$13,963	\$122	\$121	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	3	58	\$6,030	\$2,010	\$104	19
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	218	219	\$71,014	\$326	\$324	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	4	5	\$446	\$111	\$89	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	298	68,212	\$1,536,959	\$5,158	\$23	229
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processed Services   Process	Summit Pointe				Unit						
Communicy Variety Supports in Indepote the Project Support of Indepote Support in Indepote Support S	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Expert   MOMS	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Proc. Process Services   19936   Processor	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuser Laboratory	Respite		H0045		Encounter	54	779	\$150,835	\$2,793	\$194	14
Deliver Farement Plan Review   111000   Encounter   0   0   30   30   30   30   0   0   0	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Published Flame   1200	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Rehinolize Transmer Plan Review - Monitoring Activities   19300   TS   Excussor   0   0   50   50   50   50   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Compensive Missication Services - EBP only	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Criss Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Scale Bioliding and Ort of Home Non Vocational Habilitation   H2015   Encounter   0   0   0   50   50   50   170	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)	Crisis Intervention		H2011		Encounter	25	163	\$10,461	\$418	\$64	7
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	60	10,725	\$57,635	\$961	\$5	179
Delawin Surpeors (Duly)   H2016   TG   Per mile   0 0 0 50 50 50 50 50 50 50 50 50 50 50	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Part   Intensive Behavioral Intervention (EliB1)	Behavior Services		H2019		Per mile	3	24	\$1,077	\$359	\$45	8
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound (SED Waiver)	Wraparound		H2021		Per one-way trip	1	35	\$3,530	\$3,530	\$101	35
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         50	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0919   H2036   Encounter Session at least 45 min   1	Home Based Services		H2033		Items	40	4,617	\$397,199	\$9,930	\$86	115
Medication Review         M0064         Encounter         213         438         \$45,715         \$215         \$104         2           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	213	438	\$45,715	\$215	\$104	2
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Summit Pointe	D G.	HODGO G. I	M. P.C	Unit	G	***	G .	00	G .TI.	H ::/G
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	2	2,820	\$5,042	\$2,521	\$2	1,410
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	39	206	\$41,883	\$1,074	\$203	5
Targeted Case Management		T1017		Per Diem	86	6,572	\$264,841	\$3,080	\$40	76
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	24	27	\$16,118	\$672	\$597	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Summit Pointe				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	1	1	\$363	\$363	\$363	1
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	3	30	\$308	\$103	\$10	10
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0
Total Population and Cost					1,005		\$3,489,095			

Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	4	29	\$13,399	\$3,350	\$462	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	9	9	\$44,779	\$4,975	\$4,975	1
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	1	5	\$2,089	\$2,089	\$418	5
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Service Category         Revenue Code         HCPCS           Assessment for Autism         90785           Assessment         90791           Assessment for Autism         90792           Assessment for Autism         90792           Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 0913, 0916, 0919	U5 U5 U5	Measure Per Screen  Encounter 20-30 Min Encounter 20-30 Min Encounter 20-30 Min	Cases  0 41 0 0 0 31 0 0 0 0 0 0 0 0 0 0 75	Units  0 43 0 0 0 0 46 0 0 343 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Cost  \$0 \$21,201 \$0 \$0 \$0 \$0 \$0 \$0 \$3,243 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$62,166 \$0 \$0 \$0 \$0	Cost/Case \$0 \$517 \$0 \$0 \$0 \$0 \$105 \$0 \$0 \$105 \$0 \$0 \$0 \$0 \$0 \$731 \$0 \$0	S0 \$493 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$181 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Unit/Case  0 1 0 0 1 0 0 0 0 0 1 0 4 0 0 0 0
Assessment         90791           Assessment for Autism         90792           Assessment         90792           Assessment for Autism         90792           Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         9090, 0906, 0914, 90834	U5 U5 U5	Encounter Only 100 Min Encounter 20-30 Min Encounter 20-30 Min	41 0 0 0 31 0 0 0 85 0	43 0 0 0 46 0 0 0 343 0	\$21,201 \$0 \$0 \$0 \$0 \$3,243 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$517 \$0 \$0 \$0 \$105 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$493 \$0 \$0 \$0 \$71 \$0 \$0 \$0 \$181 \$0	0 0 0 1 0 0 0 0 0 4
Assessment for Autism         90791           Assessment         90792           Assessment for Autism         90792           Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5 U5	Encounter O-30 Min Encounter 20-30 Min Encounter 20-30 Min	0 0 0 31 0 0 0 85 0	0 0 0 46 0 0 0 0 343 0	\$0 \$0 \$0 \$3,243 \$0 \$0 \$0 \$0 \$62,166 \$0	\$0 \$0 \$0 \$105 \$0 \$0 \$0 \$0 \$731 \$0	\$0 \$0 \$0 \$71 \$0 \$0 \$0 \$181 \$0	0 0 0 1 0 0 0 0 4
Assessment         90792           Assessment for Autism         90792           Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5 U5	Encounter O-30 Min Encounter 20-30 Min Encounter 20-30 Min	0 0 31 0 0 0 85 0	0 0 46 0 0 0 0 343 0	\$0 \$0 \$3,243 \$0 \$0 \$0 \$62,166 \$0	\$0 \$0 \$105 \$0 \$0 \$0 \$0 \$731 \$0	\$0 \$0 \$71 \$0 \$0 \$0 \$0 \$181 \$0	0 0 1 0 0 0 0 4
Assessment for Autism         90792           Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919           Assessment         90832           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5 U5	Encounter O-30 Min Encounter 20-30 Min Encounter 20-30 Min	0 31 0 0 0 0 85 0	0 46 0 0 0 0 343 0	\$0 \$3,243 \$0 \$0 \$0 \$0 \$62,166 \$0	\$0 \$105 \$0 \$0 \$0 \$0 \$731 \$0	\$0 \$71 \$0 \$0 \$0 \$181 \$0	0 1 0 0 0 0 4
Mental Health: Outpatient Care         90832           Substance abuse: Outpatient Care         0900, 0906, 0914, 0919         90832           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5	Encounter  Encounter  Encounter  Encounter  Encounter  Encounter  Encounter  Encounter  Only 100 Min  Encounter 20-30 Min  Encounter 20-30 Min  Encounter 20-30 Min	31 0 0 0 0 85 0	46 0 0 0 0 343 0	\$3,243 \$0 \$0 \$0 \$0 \$62,166 \$0	\$105 \$0 \$0 \$0 \$0 \$731 \$0	\$71 \$0 \$0 \$0 \$0 \$181 \$0	0 0 0 4 0
Substance abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         90832           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5	Encounter  Encounter  Encounter  Encounter  Encounter  Encounter  Encounter 20-30 Min  Encounter 20-30 Min  Encounter 20-30 Min	0 0 0 85 0	0 0 0 343 0	\$0 \$0 \$0 \$62,166 \$0	\$0 \$0 \$0 \$731 \$0	\$0 \$0 \$0 \$181 \$0	0 0 0 4 0
0915, 0916, 0919           Assessment         90833           Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5	Encounter Encounter Encounter Encounter Encounter Encounter 20-30 Min Encounter 20-30 Min	0 0 85 0	0 0 343 0	\$0 \$0 \$62,166 \$0	\$0 \$0 \$731 \$0 \$0	\$0 \$0 \$181 \$0	0 0 4 0
Assessment for Autism         90833           Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834	U5	Encounter Encounter Encounter Encounter 20-30 Min Encounter 20-30 Min Encounter 20-30 Min	0 85 0 0	0 343 0	\$0 \$62,166 \$0 \$0	\$0 \$731 \$0 \$0	\$0 \$181 \$0 \$0	0 4 0
Mental Health: Outpatient Care         90834           Substance abuse: Outpatient Care         0900, 0906, 0914, 90834		Encounter  Encounter 20-30 Min  Encounter 20-30 Min  Encounter 20-30 Min	85 0 0 0	343 0 0	\$62,166 \$0 \$0	\$731 \$0 \$0	\$181 \$0 \$0	4 0
Substance abuse: Outpatient Care 0900, 0906, 0914, 90834		Encounter 20-30 Min Encounter 20-30 Min Encounter 20-30 Min	0 0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
		Encounter 20-30 Min Encounter 20-30 Min Encounter 20-30 Min	0	0	\$0	\$0	\$0	
		Encounter 20-30 Min Encounter 20-30 Min	0					0
Assessment 90836	U5	Encounter 20-30 Min		0	\$0	0.2		-
Assessment for Autism 90836			75			ΦU	\$0	0
Mental Health: Outpatient Care 90837		Encounter 20-30 Min		252	\$83,877	\$1,118	\$333	3
Substance abuse: Outpatient Care 90837		Encounter 20-30 Milli	0	0	\$0	\$0	\$0	0
Assessment 90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism 90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes 90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes 90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy 90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy 90847		Encounter 75-80 Min	9	17	\$3,978	\$442	\$234	2
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy 90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy 90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy 90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment         0900, 0906, 0914, 0915, 0916, 0919         90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver) 90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician 90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician 0901 90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other 90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14) 92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy 92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy 92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy 92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy 92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Speech & Lampage Therapy							Unit				Tuscola
Spoots & Language Therapy         92234         Exocutar 55-80 Min         0         0         50         50           Speech & Language Therapy         92236         Exocutar 75-80 Min         0         0         50         50           Speech & Language Therapy         92510         Exocutar 55-80 Min         0         0         50         50           Psychological Testing FYCHIPIYS         96101         U.5         Exocutar 55-90 Min         3         12         815-55         508           Assessment for Autism         96102         U.5         Exocutar 57-80 Min         0         0         50         30           Psychological Testing by Chorp         96102         U.5         30 Minutes         0         0         50         30           Psychological Testing by Chorp         96105         30 Minutes         0         0         50         30           Psychological Testing by Chorp         96105         30 Minutes         0         0         50         30           Assessment-Order         96105         30 Minutes         0         0         50         30           Assessment-Order         96110         30 Minutes         0         0         50         30           Asses	Init Unit/Case	Cost/Unit	Cost/Case	Cost	Units	Cases	Measure	Modifier	HCPCS Code	Revenue Code	Service Category
Speech & Language Therapy         93:526         Encounter 75:80 Min         0         0         80         50           Speech & Language Therapy         92:10         Excounter 75:80 Min         0         0         80         50           Speech & Language Therapy         96:101         Excounter 75:80 Min         3         12         \$15:25         508           Assessment for Autism         96:101         US         Excounter 75:80 Min         3         25         \$866         \$329           Psychological Testing by Ceding         96:102         US         30 Manutes         0         0         80         50           Assessment Ger Autism         96:102         US         30 Manutes         0         0         80         50           Assessment Ger Autism         96:103         30 Manutes         0         0         80         50           Assessment Ger Autism         96:104         30 Manutes         0         0         80         50           Assessment Ger Autism         96:107         30 Manutes         0         0         80         50           Assessment Ger Autism         96:108         30 Manutes         0         0         80         50           Assessment Ger	\$0	\$0	\$0	\$0	0	0	Encounter 45-50 Min		92523		Speech & Language Therapy
Speech & Language Therapy	\$0	\$0	\$0	\$0	0	0	Encounter 45-50 Min		92524		Speech & Language Therapy
Psychological Testing PSYCHIPHYS	\$0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		92526		Speech & Language Therapy
Assessment for Autism	\$0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		92610		Speech & Language Therapy
Psychological Testing by Technician	27	\$127	\$508	\$1,525	12	3	Encounter 45-50 Min		96101		Psychological Testing PSYCH/PHYS
New North Park Nation	35	\$35	\$289	\$866	25	3	Encounter 75-80 Min	U5	96101		Assessment for Autism
Psychological Testing by Comp	\$0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		96102		Psychological Testing by Technician
Assessments-Other 96105 30 Minutes 0 0 0 50 50 Assessments-Other 96110 30 Minutes 0 0 0 50 50 Assessments-Other 96111 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96116 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96116 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96118 U5 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96118 U5 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96118 U5 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96118 U5 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96118 U5 45 Minutes 0 0 0 50 50 Neuropean Status Exam 96119 U5 60 Minutes 0 0 0 50 50 Neuropean Status Exam 96119 U5 60 Minutes 0 0 0 50 50 Neuropean Status Exam 96120 60 Minutes 0 0 0 50 50 Neuropean Status Exam 96120 60 Minutes 0 0 0 50 50 Neuropean Status Exam 96120 60 Minutes 0 0 50 50 Neuropean Status Exam 96120 60 Minutes 0 0 0 50 50	\$0	\$0	\$0	\$0	0	0	30 Minutes	U5	96102		Assessment for Autism
Assessments-Other 96110 30 Minntes 0 0 0 50 50 50 Assessments-Other 96111 45 Minntes 0 0 0 50 50 50 Northeather Status Exam 96116 45 Minntes 0 0 0 50 50 50 Northeather Status Exam 96118 45 Minntes 0 0 0 50 50 50 Northeather Status Exam 96118 45 Minntes 0 0 0 50 50 50 Northeather Status Exam 96118 U5 45 Minntes 0 0 0 50 50 50 Northeather Status Status 10 0 0 50 50 50 Northeather Status 10 0 0 50 50 50 Northeather Status 10 0 0 50 50 50 Northeather Status 10 0 0 50 50 Northeather Status 10 Northeather 10 Northeather Status 10 Northeather Status 10 Northeather Status 10 Northeather 10 Northeather Status 10 Northeather 10 Northeather Status 10 Northeather 10 Northea	\$0	\$0	\$0	\$0	0	0	30 Minutes		96103		Psychological Testing by Comp
Assessments-Other	\$0	\$0	\$0	\$0	0	0	30 Minutes		96105		Assessments-Other
Neuropsych test by PsychPhys	\$0	\$0	\$0	\$0	0	0	30 Minutes		96110		Assessments-Other
Neuropsych test by Psych Phys	\$0	\$0	\$0	\$0	0	0	45 Minutes		96111		Assessments-Other
Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 Neuropsych test by Tech 96119 60 Minutes 0 0 0 50 50 50 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 Neuropsych test Admin wComp 96120 60 Minutes 0 0 0 50 50 50 Neuropsych test Admin wComp 96372 60 Minutes 0 0 0 50 50 Neuropsych test Admin wComp 97001 First 30-74 Min. 0 0 0 50 50 Neuropsych test Admin wComp 97002 Each Additional 30 0 0 50 50 Neuropsych test Minutes 0 0 0 50 S0 Neuropsych test Minutes 0 0 0 50 S0 Neuropsych test Minutes 0 0 0 50 Neuropsych test Minutes 0 0 0 50 Neuropsych test Minutes 0 0 0 0 S0 Neuropsych test Minutes 0 0 0 0 S0 Neuropsych test Minutes 0 0 0 Neuropsych test Minutes 0 0 0 Neuropsych test Minutes 0 Neuropsych	\$0	\$0	\$0	\$0	0	0	45 Minutes		96116		Neurobehavioral Status Exam
Neuropsych test by Tech	\$0	\$0	\$0	\$0	0	0	45 Minutes		96118		Neuropsych test by Psych/Phys
Assessment for Autism   96119   U5   60 Minutes   0   0   50   50     Neuropsych test Admin w/Comp   96120   60 Minutes   0   0   50   50     Medication Administration   96372   60 Minutes   0   0   50   50     Medication Administration   97001   First 30-74 Min.   0   0   50   50     Physical Therapy   97002   Each Additional 30   0   0   50   50     Minutes	\$0	\$0	\$0	\$0	0	0	45 Minutes	U5	96118		Assessment for Autism
Neuropsych test Admin w/Comp	\$0	\$0	\$0	\$0	0	0	60 Minutes		96119		Neuropsych test by Tech
Medication Administration         96372         60 Minutes         0         0         \$0         \$0           Physical Therapy         97001         First 30-74 Min.         0         0         \$0         \$0           Physical Therapy         97002         Each Additional 30 Minutes         0         0         \$0         \$0         \$0           Occupational Therapy         97003         Encounter         0         0         \$0	\$0	\$0	\$0	\$0	0	0	60 Minutes	U5	96119		Assessment for Autism
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50	\$0	\$0	\$0	\$0	0	0	60 Minutes		96120		Neuropsych test Admin w/Comp
Physical Therapy   97002   Each Additional 30	\$0	\$0	\$0	\$0	0	0	60 Minutes		96372		Medication Administration
Minutes         Minutes           Occupational Therapy         97003         Encounter         0         0         \$0         \$0         \$0           Occupational Therapy         97004         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0	\$0	\$0	\$0	\$0	0	0	First 30-74 Min.		97001		Physical Therapy
Occupational Therapy         97004         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533	\$0	\$0	\$0	\$0	0	0			97002		Physical Therapy
Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         975	\$0	\$0	\$0	\$0	0	0	Encounter		97003		Occupational Therapy
Occupational or Physical Therapy         97112         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97004		Occupational Therapy
Occupational or Physical Therapy         97113         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97110		Occupational or Physical Therapy
Occupational or Physical Therapy         97116         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97112		Occupational or Physical Therapy
Occupational or Physical Therapy         97124         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97113		Occupational or Physical Therapy
Occupational or Physical Therapy         97140         Encounter         0         0         50         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97116		Occupational or Physical Therapy
Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97124		Occupational or Physical Therapy
Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97140		Occupational or Physical Therapy
Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97150		Occupational or Physical Therapy
Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97530		Occupational or Physical Therapy
Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97532		Occupational or Physical Therapy
	\$0	\$0	\$0	\$0	0	0	Encounter		97533		Occupational or Physical Therapy
	\$0	\$0	\$0	\$0	0	0	Encounter		97535		Occupational or Physical Therapy
Occupational or Physical Therapy 97537 Encounter 0 0 \$0 \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97537		Occupational or Physical Therapy
Occupational or Physical Therapy 97542 Encounter 0 0 \$0 \$0 \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97542		Occupational or Physical Therapy
Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97750		Occupational or Physical Therapy
Occupational Therapy         97755         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97755		Occupational Therapy
Occupational or Physical Therapy 97760 Encounter 0 0 \$0 \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97760		Occupational or Physical Therapy
C/O for Orthotic/Prosth Use or Physical Therapy 97762 Encounter 0 0 \$0 \$0	\$0	\$0	\$0	\$0	0	0	Encounter		97762	у	C/O for Orthotic/Prosth Use or Physical Therapy

Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	84	177	\$40,524	\$482	\$229	2
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	72	152	\$46,863	\$651	\$308	2
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	26	42	\$17,322	\$666	\$412	2
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	3	3	\$1,974	\$658	\$658	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	9	9	\$1,219	\$135	\$135	1
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	1	1	\$39	\$39	\$39	1
Additional Codes-Physician Services		99232		15 Minutes	9	48	\$3,386	\$376	\$71	5
Additional Codes-Physician Services		99233		15 Minutes	2	5	\$513	\$257	\$103	3
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		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: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	84	95	\$31,231	\$372	\$329	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	82	90	\$28,318	\$345	\$315	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$230	\$230	\$230	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	118	15,756	\$1,026,977	\$8,703	\$65	134
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

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Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		Encounter	5	20	\$1,715	\$343	\$86	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		Encounter	1	386	\$3,104	\$3,104	\$8	386
Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	2	1,608	\$82,390	\$41,195	\$51	804
Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound		H2021		Per one-way trip	1	18	\$1,508	\$1,508	\$84	18
Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		Per Mile	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client		S5108	U5	Encounter	2	16	\$1,622	\$811	\$101	8
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Tuscola				Unit						
Service Category	Revenue Code F	ICPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	14	4,038	\$8,303	\$593	\$2	288
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	7	120	\$13,594	\$1,942	\$113	17
Targeted Case Management		T1017		Per Diem	14	526	\$47,678	\$3,406	\$91	38
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	22	25	\$17,023	\$774	\$681	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

Tuscola				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	49	422	\$3,353	\$68	\$8	9
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	48	0	\$5,945	\$124	\$0	0
Aggregate for 'J' Codes	·	ALL		Service	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

257

\$1,621,954

**Total Population and Cost** 

Van Buren				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	12	108	\$84,698	\$7,058	\$784	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	6	23	\$13,572	\$2,262	\$590	4
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Van Buren				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			121	126	\$34,306	\$284	\$272	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	53	53	\$16,538	\$312	\$312	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	52	180	\$17,232	\$331	\$96	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	130	497	\$86,772	\$667	\$175	4
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	64	260	\$71,450	\$1,116	\$275	4
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	18	44	\$7,408	\$412	\$168	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	52	170	\$20,605	\$396	\$121	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	19	72	\$5,203	\$274	\$72	4
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Cargary   Service Ca							Unit				Van Buren
Spreach & Language Therapy	Init Unit/Case	Cost/Unit	Cost/Case	Cost	Units	Cases	Measure	Modifier	HCPCS Code	Revenue Code	Service Category
Speech & Language Therapy	\$0 0	\$0	\$0	\$0	0	0	Encounter 45-50 Min		92523		Speech & Language Therapy
Speech & Language Therapy	\$0 0	\$0	\$0	\$0	0	0	Encounter 45-50 Min		92524		Speech & Language Therapy
Psychological Testing PSYCHIPHYS	\$0 0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		92526		Speech & Language Therapy
Assessment For Autism   96101   U5	\$0 0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		92610		Speech & Language Therapy
Psychological Testing by Technician	91 3	\$191	\$574	\$6,319	33	11	Encounter 45-50 Min		96101		Psychological Testing PSYCH/PHYS
Assessment for Autism	98 3	\$198	\$495	\$990	5	2	Encounter 75-80 Min	U5	96101		Assessment for Autism
Psychological Testing by Comp	\$0 0	\$0	\$0	\$0	0	0	Encounter 75-80 Min		96102		Psychological Testing by Technician
Assessments-Other 96105 30 Minutes 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 0	\$0	\$0	\$0	0	0	30 Minutes	U5	96102		Assessment for Autism
Assessments-Other	\$0 0	\$0	\$0	\$0	0	0	30 Minutes		96103		Psychological Testing by Comp
Assessments-Other	\$0 0	\$0	\$0	\$0	0	0	30 Minutes		96105		Assessments-Other
Neuropsch test by PschPhys	\$0 0	\$0	\$0	\$0	0	0	30 Minutes		96110		Assessments-Other
Neuropsych test by Psych-Phys   96118	\$0 0	\$0	\$0	\$0	0	0	45 Minutes		96111		Assessments-Other
Assessment for Autism   96118	\$0 0	\$0	\$0	\$0	0	0	45 Minutes		96116		Neurobehavioral Status Exam
Neuropsych test by Tech	\$0 0	\$0	\$0	\$0	0	0	45 Minutes		96118		Neuropsych test by Psych/Phys
Assessment for Autism   96119   U5   60 Minutes   0   0   S0   S0     Neuropsych test Admin wComp   96120   60 Minutes   0   0   S0   S0     Medication Administration   96372   60 Minutes   0   0   S0   S0     Physical Therapy   97001   First 30-74 Min.   0   0   S0   S0     Physical Therapy   97002   Each Additional 30   0   0   S0   S0     Physical Therapy   97003   Encounter   0   0   S0   S0     Occupational Therapy   97004   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97110   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97112   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97116   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97116   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97114   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97114   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97140   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97150   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97530   Encounter   0   0   S0   S0     Occupational or Physical Therapy   97530   Encounter   0   0   S0   S0	\$0 0	\$0	\$0	\$0	0	0	45 Minutes	U5	96118		Assessment for Autism
Neuropsych test Admin w/Comp         96120         60 Minutes         0         0         \$0         \$0           Medication Administration         96372         60 Minutes         0         0         \$0         \$0         \$0           Physical Therapy         97001         First 30-74 Min.         0         0         \$0         \$0         \$0           Physical Therapy         97002         Each Additional 30 Minutes         0         0         \$0         \$0         \$0           Occupational Therapy         97003         Encounter         0         0         \$0         \$0         \$0           Occupational Therapy         97004         Encounter         0         0         \$	\$0 0	\$0	\$0	\$0	0	0	60 Minutes		96119		Neuropsych test by Tech
Medication Administration         96372         60 Minutes         0         0         \$0         \$0           Physical Therapy         97001         First 30-74 Min.         0         0         \$0         \$0           Physical Therapy         97002         Each Additional 30 Minutes         0         0         \$0         \$0           Occupational Therapy         97003         Encounter         0         0         \$0         \$0           Occupational Therapy         97004         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         9716         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy	\$0 0	\$0	\$0	\$0	0	0	60 Minutes	U5	96119		Assessment for Autism
Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50	\$0 0	\$0	\$0	\$0	0	0	60 Minutes		96120		Neuropsych test Admin w/Comp
Physical Therapy   97002   Each Additional 30   0   0   50   50   50	\$0 0	\$0	\$0	\$0	0	0	60 Minutes		96372		Medication Administration
Minutes           Occupational Therapy         97003         Encounter         0         0         \$0         \$0         \$0           Occupational Therapy         97004         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0	\$0 0	\$0	\$0	\$0	0	0	First 30-74 Min.		97001		Physical Therapy
Occupational Therapy         97004         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533	\$0 0	\$0	\$0	\$0	0	0			97002		Physical Therapy
Occupational or Physical Therapy         97110         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97003		Occupational Therapy
Occupational or Physical Therapy         97112         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97004		Occupational Therapy
Occupational or Physical Therapy         97113         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97110		Occupational or Physical Therapy
Occupational or Physical Therapy         97116         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97112		Occupational or Physical Therapy
Occupational or Physical Therapy         97124         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97113		Occupational or Physical Therapy
Occupational or Physical Therapy         97140         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97116		Occupational or Physical Therapy
Occupational or Physical Therapy         97150         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97124		Occupational or Physical Therapy
Occupational or Physical Therapy         97530         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97140		Occupational or Physical Therapy
Occupational or Physical Therapy         97532         Encounter         0         0         \$0         \$0         \$0           Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97150		Occupational or Physical Therapy
Occupational or Physical Therapy         97533         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97530		Occupational or Physical Therapy
	\$0 0	\$0	\$0	\$0	0	0	Encounter		97532		Occupational or Physical Therapy
Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97533		Occupational or Physical Therapy
	\$0 0	\$0	\$0	\$0	0	0	Encounter		97535		Occupational or Physical Therapy
Occupational or Physical Therapy 97537 Encounter 0 0 \$0 \$0 \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97537		Occupational or Physical Therapy
Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97542		Occupational or Physical Therapy
Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97750		Occupational or Physical Therapy
Occupational Therapy         97755         Encounter         0         0         \$0         \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97755		Occupational Therapy
Occupational or Physical Therapy 97760 Encounter 0 0 \$0 \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97760		Occupational or Physical Therapy
C/O for Orthotic/Prosth Use or Physical Therapy 97762 Encounter 0 0 \$0 \$0	\$0 0	\$0	\$0	\$0	0	0	Encounter		97762		C/O for Orthotic/Prosth Use or Physical Therapy

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Service Cappage   Service   Servic	Van Buren				Unit						
Second Print   Seco	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abner Augustume	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Submance Abuse: Accordance   97811     Encounter   0   0   50   50   50   50   50   50	Health Services		97804			0	0	\$0	\$0	\$0	0
New Placin Foliation and Minagement   99:01   15   New   0   0   0   39   50   30   0   0	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   92302   Per Hour   0   0   30   30   30   30   0   0	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Planest Evaluation and Management   99202	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Ascessment for Authins	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Fouluation and Management   992051   Per Hour   0   0   50   50   50   50   0	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Accessment for Authinn	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Abose: New Patient Evaluation and Management   92031   Encounter   0   0   50   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Alvase: New Patient Evaluation and Management   99204   Per Hour   0   0   30   30   30   50   0	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   O	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 Substance Abuse: New Parient Evaluation and Management 99211 Per Hour 0 0 0 50 50 50 50 0 Sachstance Abuse: New Parient Evaluation and Management 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Autism 99211 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 0 Sacsiment for Autism 99213 U5 Encounter 99213 U5 Encounter 98 207 \$16,793 \$171 \$81 2 Sacsiment for Autism 99214 U5 Encounter 98 207 \$16,793 \$171 \$81 2 Sacsiment for Autism 99214 Sacsiment for Autism 99215 Sacsiment for Autism 99216 Sacsiment for Autism 99216 Sacsiment for Autism 99217 Sacsiment for Autism 99218 Sacsiment for Autism 99219 Sacsiment for Autism 99219 Sacsiment for Autism 99219 Sacsiment for Autism 99211 Sacsiment for Autism 99215 Sacsiment for Autism 99216 Sacsiment for Autism 99216 Sacsiment for Autism 99217 Sacsiment for Autism 99218 Sacsiment for Autism 99219 Sacsiment for Autism 99219 Sacsiment for Autism 99210 Sacsiment for Autism 99210 Sacsiment for Autism 99211 Sacsiment for Autism 99212 Sacsiment for Autism 99213 Sacsiment for Autism 99224 Sacsiment for Autism 99225 Sacsiment for Autism 99226 Sacsiment for Autism 99226 Sacsiment for Autism 99227 Sacsiment for Autism 99228 Sacsiment for Autism 99229 Sacsiment for Autism 99230 Sacsiment for Autism 99231 Sacsiment for Autism 99231 Sacsiment for Autism 99231 Sacsiment for Autism 99232 Sacsiment for Autism 99232 Sacsiment for Autism 99233 Sacsiment for Auti	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205   Hour   0   0   S0   S0   S0   S0   0   Established Patient Evaluation and Management   99211   De Per Hour   0   0   S0   S0   S0   S0   S0   S0	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Per Hour   Per Hour   O	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99211   U5   Encounter   0   0   S0   S0   S0   S0   0	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212   Encounter   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism   99212   U5   Encounter   0   0   80   80   80   0   0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   Encounter   0   0   0   50   50   50   0   0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99213   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   77   170   \$18,903   \$245   \$111   2	Established Patient Evaluation and Management		99213		Encounter	98	207	\$16,793	\$171	\$81	2
Assessment for Autism         99214         U5         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$108 <td>Assessment for Autism</td> <td></td> <td>99213</td> <td>U5</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   1   1   \$108   \$108   \$108   1     Assessment for Autism   99215   U5   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	77	170	\$18,903	\$245	\$111	2
Assessment for Autism         99215         U5         15 Minutes         0         0         80         80         80         0           Additional Codes-Physician Services         99221         15 Minutes         2         2         895         548         548         1           Additional Codes-Physician Services         99222         15 Minutes         2         2         8170         885         885         1           Additional Codes-Physician Services         99223         Encounter         0         0         80         80         80         0           Additional Codes-Physician Services         99224         15 Minutes         0         0         80         80         80         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         80         80         80         0           Additional Codes-Physician Services         99226         15 Minutes         2         5         \$130         \$65         \$26         3           Additional Codes-Physician Services         99231         15 Minutes         2         5         \$130         \$65         \$26         3           Additional Codes-Physician Services         99232         15 Minu	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         2         2         2         895         \$48         \$48         1           Additional Codes-Physician Services         99222         15 Minutes         2         2         2         \$170         \$85         \$85         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0         <	Established Patient Evaluation and Management		99215		15 Minutes	1	1	\$108	\$108	\$108	1
Additional Codes-Physician Services         99222         15 Minutes         2         2         \$170         \$85         \$85         1           Additional Codes-Physician Services         99223         Encounter         0         0         \$0 <t< td=""><td>Assessment for Autism</td><td></td><td>99215</td><td>U5</td><td>15 Minutes</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         0         0         50         \$0	Additional Codes-Physician Services		99221		15 Minutes	2	2	\$95	\$48	\$48	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99225         15 Minutes         0         0         50         \$	Additional Codes-Physician Services		99222		15 Minutes	2	2	\$170	\$85	\$85	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         50         \$0         \$0         0           Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99226         15 Minutes         0         0         50         \$26         \$26         \$3         \$3         \$416         \$25         \$127         \$85         \$2         \$2         \$4         \$4         \$2         \$3         \$25         \$127         \$85         \$2         \$2         \$4         \$4         \$2         \$3         \$186         \$62         \$62         \$62         \$1         \$2         \$4 </td <td>Additional Codes-Physician Services</td> <td></td> <td>99224</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         2         5         \$130         \$65         \$26         3           Additional Codes-Physician Services         99232         15 Minutes         2         3         \$255         \$127         \$85         2           Additional Codes-Physician Services         99233         15 Minutes         3         3         \$186         \$62         \$62         1           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         2         3         \$255         \$127         \$85         2           Additional Codes-Physician Services         99233         15 Minutes         3         3         \$186         \$62         \$62         1           Assessment         99324         15 Minutes         0         0         \$0         <	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9923         15 Minutes         3         3         \$186         \$62         \$62         1           Assessment         99324         15 Minutes         0         0         \$0<	Additional Codes-Physician Services		99231		15 Minutes	2	5	\$130	\$65	\$26	3
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>2</td> <td>3</td> <td>\$255</td> <td>\$127</td> <td>\$85</td> <td>2</td>	Additional Codes-Physician Services		99232		15 Minutes	2	3	\$255	\$127	\$85	2
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	3	3	\$186	\$62	\$62	1
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Samily Cotton	D C I I									
Service Category	Revenue Code I	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Van Buren				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	297	314	\$62,067	\$209	\$198	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	2	15	\$12,700	\$6,350	\$847	8
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	43	45	\$11,982	\$279	\$266	1
Assessment for Autism		H0031	U5	Encounter	1	1	\$2,261	\$2,261	\$2,261	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	117	131	\$25,926	\$222	\$198	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$198	\$198	\$198	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	25	2,290	\$279,928	\$11,197	\$122	92
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

New Note   New No.   New	Van Buren				Unit						
Sementy   1600	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Paper   100000000000000000000000000000000000	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Perf Directed and Operande Suppress   11006   100   10   10   10   10   10	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Laburatory	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Pathware Abhase Chaptairent Treatment   1986, 1986, 1986   1986	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pathwork   12000   1	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Selection Transmer His Review - Monitoring Activities   H2000   TS   Baccounter   0   0   50   50   50   50   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptions Medication Services - EBP only	Behavior Treatment Plan Review		H2000		Encounter	2	6	\$1,482	\$741	\$247	3
Part	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Salik-Building and Our of Home Non-Vocational Habilitation   H2015   Encounter   0   0   80   50   50   50   50   50	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
	Crisis Intervention		H2011		Encounter	40	170	\$8,197	\$205	\$48	4
Community Living Supports (Daihy)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	42	3,710	\$1,949	\$46	\$1	88
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	1	105	\$54,334	\$54,334	\$517	105
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   0   0   S0   S0   S0   S0   S0   S0	Community Living Supports (Daily)		H2016	TG	Per mile	1	36	\$18,629	\$18,629	\$517	36
Early Intensive Behavioral Intervention (EIIBI)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Griss Intervention         H2020         Per one-way trip         0         0         SO         SO         SO         O           Wraparound         H2021         Per one-way trip         48         2,431         SO         SO         SO         51           Wraparound (SED Waiver)         H2022         Per one-way trip         0         0         SO         SO         SO         O           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         SO         SO         SO         O           Supported Employment Services         H2023         Per one-way trip         0         0         SO         <	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround Membra   Marg	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	1	205	\$3,862	\$3,862	\$19	205
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maria   Mari	Wraparound		H2021		Per one-way trip	48	2,431	\$0	\$0	\$0	51
Supported Employment Services   H2023   Per one-way trip   0   0   50   50   50   0     Mental Health Therapy   H2027   Per Mile   0   0   50   50   50   50   0     Subtance Abuse Services: Outpatient Care   0900, 0914, 0915,	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubbiouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least op15, 0916, 0919   H2036	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   M064   Encounter   1   2   \$198   \$198   \$99   2   1   1   2   1   2   1   2   1   2   2	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         2         \$198         \$198         \$99         2           Transportation         \$0209         Encounter         0         0         \$0         <	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         \$0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	2	\$198	\$198	\$99	2
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         1         15         \$3,448         \$3,448         \$230         15           Family Training - EBP         S5110         Encounter         0         0         \$0	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$295         3           Family Training         \$5111         HA         Days         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         3         8         \$2,357         \$786         \$295         3           Family Training         \$5111         HA         Days         0         0         \$0 <td>Home Care Training to Home Care Client</td> <td></td> <td>S5108</td> <td>U5</td> <td>Encounter</td> <td>1</td> <td>15</td> <td>\$3,448</td> <td>\$3,448</td> <td>\$230</td> <td>15</td>	Home Care Training to Home Care Client		S5108	U5	Encounter	1	15	\$3,448	\$3,448	\$230	15
Family Training         S5111         HA         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	3	8	\$2,357	\$786	\$295	3
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Van Buren				Unit	_		_			
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0	0
Respite		S5150		Days	0	0	\$0	\$0	\$0	0
Respite		S5151		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification		S5165		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		S9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services		S9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		S9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	0	0	\$0	\$0	\$0	0
Health Services		T1002		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005		Encounter	6	456	\$1,724	\$287	\$4	76
Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	15 Minutes	4	833	\$3,300	\$825	\$4	208
Substance Abuse: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		Per Diem	1	2	\$281	\$281	\$141	2
Targeted Case Management		T1017		Per Diem	64	2,259	\$305,053	\$4,766	\$135	35
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		15 Minutes	26	35	\$10,395	\$400	\$297	1
Prevention Services - Direct Model		T1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Days	0	0	\$0	\$0	\$0	0
Transportation		T2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2002		15 Minutes	0	0	\$0	\$0	\$0	0

ALL

Children with Serious Emotional Disturbance

### Van Buren Unit Revenue Code HCPCS Code Modifier Cases Units Cost Cost/Case Cost/Unit Unit/Case Service Category Measure Transportation T2003 15 Minutes 0 0 \$0 \$0 \$0 0 T2003 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation Hour 0 Transportation T2004 Per Diem 0 0 \$0 \$0 \$0 0 Substance Abuse Services: Transportation T2004 15 Minutes 0 0 \$0 \$0 \$0 0 Transportation T2005 Encounter Face-to-Face, 0 0 \$0 \$0 \$0 0 generally less than 10 minutes Substance Abuse Services: Transportation T2005 Per Mile 0 0 \$0 \$0 \$0 0 T2024 0 0 \$0 \$0 \$0 0 Prevention Services - Direct Model 15 Minutes T2025 \$0 Fiscal Intermediary Services 15 Minutes 0 0 \$0 \$0 0 Enhanced Medical Equipment-Supplies T2028 0 0 \$0 \$0 \$0 0 Encounter T2029 0 \$0 \$0 Enhanced Medical Equipment-Supplies Encounter 0 \$0 0 Crisis Intervention T2034 Encounter 0 0 \$0 \$0 \$0 0 Respite Care 0 T2036 Encounter 0 \$0 \$0 \$0 0 T2037 0 0 \$0 \$0 \$0 0 Respite Care Days 0 \$0 T2038 0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies T2039 15 Minutes 0 0 \$0 \$0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 0 \$0 Pharmacy (Drugs and Other Biologicals) Encounter 0 0 \$0 \$0 0 Other 0 0 \$0 \$0 \$0 Month 0

Service

0

555

0

\$0

\$1,212,001

\$0

\$0

0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

Aggregate for 'J' Codes

**Total Population and Cost** 

# notional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Washtenaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	28	\$13,249	\$13,249	\$473	28
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	25	188	\$114,218	\$4,569	\$608	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	49	484	\$376,862	\$7,691	\$779	10
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	8		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	1	15	\$13,603	\$13,603	\$907	15
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	19	272	\$93,108	\$4,900	\$342	14
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	3	4	\$1,103	\$368	\$276	1

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Washtenaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			4	4	\$896	\$224	\$224	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	100	101	\$23,825	\$238	\$236	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	9	19	\$2,320	\$258	\$122	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	36	76	\$14,029	\$390	\$185	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	50	173	\$45,240	\$905	\$262	3
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	43	207	\$52,657	\$1,225	\$254	5
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	257	1,832	\$450,489	\$1,753	\$246	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	7	39	\$14,590	\$2,084	\$374	6
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	28	204	\$72,908	\$2,604	\$357	7
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
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# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Proceedings   Process	Washtenaw				Unit						
Special for Images Printing   92.54   Processer 65.00 Min   0   0   0   0   0   0   0   0   0	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Special Relanguige Theory   9255   Enounter 75-50 Min   0   0   90   90   90   90   90   90	Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Theragy   9201	Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCLIPIYS	Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Authors   96001   U5   Resourter 75-80 Min   0   0   50   50   50   50   0	Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
	Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Accounted the Audition	Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Tening by Course   96103   30 Manates   0   0   50   50   30   30   0	Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Accounter-Other	Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment Cher   96110   30 Manutes   0   0   50   50   50   50   0   0	Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Accordance Other   96111	Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Neumopoch text by Psych Phys   181	Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys   96118	Assessments-Other		96111		45 Minutes	1	1	\$186	\$186	\$186	1
Assessment for Auristan    Mean opposite tests   Techen   Montanes	Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych text by Tech	Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authinn   96119   U5   60 Minutes   0   0   50   50   50   0   10     Neuropsych test Admin wComp   96120   60 Minutes   5   33   32.456   8491   874   74     Medication Administration   96372   60 Minutes   5   33   32.456   8491   874   74     Physical Therapy   97001   First 30-74 Min.   0   0   50   50   50   50   0     Physical Therapy   97002   Each Additional 20   0   0   50   50   50   50     Physical Therapy   97003   Encounter   0   0   50   50   50   50   0     Occupational Therapy   97004   Encounter   0   0   50   50   50   50   0     Occupational Therapy   97110   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97112   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97116   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97114   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97150   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97150   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97532   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97531   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97531   Encounter   0   0   50   50   50   50   0     Occupational Or Physical Therapy   97531   Encounter   0   0   50   50   50   50   50   50	Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin wComp	Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration   96372   60 Minutes   5   33   \$2,456   \$491   \$74   7     Physical Therapy   97001   First 307-44 Min.   0   0   50   \$50   \$50   \$0     Physical Therapy   97002   Each Additional 30   0   0   50   \$50   \$50   \$0     Physical Therapy   97003   Eacounter   1   1   \$244   \$2	Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   S0   S0   S0   S0   D0	Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30   0   0   50   50   50   0	Medication Administration		96372		60 Minutes	5	33	\$2,456	\$491	\$74	7
Minutes   Minu	Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Therapy         97004         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97110         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97112         Encounter         0         0         SO         SO         SO         O           Occupational or Physical Therapy         97116         Encounter         0         0         SO         SO         SO         SO         O           Occupational or Physical Therapy         97124         Encounter         0         0         SO	Physical Therapy		97002			0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         S0         S0         S0         0           Occupational or Physical Therapy         97112         Encounter         0         0         S0         S0         S0         S0         0           Occupational or Physical Therapy         97116         Encounter         0         0         S0	Occupational Therapy		97003		Encounter	1	1	\$244	\$244	\$244	1
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td></td> <td>97004</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy		97004		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy   97116   Encounter   0   0   50   50   50   0	Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         S0         S0         S0         O           Occupational or Physical Therapy         97124         Encounter         0         0         S0	Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97113</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97116</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97124</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97140</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97150</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97530</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97532</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97533</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97535</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97537</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td></td> <td>97750</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
	Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy         97762         Encounter         0         0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
	C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0

# rbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Washtenaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	3	3	\$310	\$103	\$103	1
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	117	404	\$39,265	\$336	\$97	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	200	694	\$75,486	\$377	\$109	3
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	11	13	\$1,664	\$151	\$128	1
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

# otional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Kernes (Largery)         Kreams (Largery)         List of Market (Largery)         Market (Largery)         Control         Open         Control         Control         1952         List of Market         Control         1953         List of Market         Control         1953         List of Market         Control         1950<	Washtenaw				Unit						
Assencer   Assence   Ass	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Asserment for Actions	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Secondary   1972   1   1   1   1   1   1   1   1   1	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Sessement   Sess	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Authors	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accounter for Autism	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Audism	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authin 99135 US Facouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99236 Eacouster 0 0 0 30 50 50 50 0 0 Assessment for Authin 99236 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99237 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99237 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99241 US Eacouster 0 0 0 50 50 50 50 50 0 0 Assessment for Authin 99241 US Eacouster 0 0 0 50 50 50 50 50 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 0 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 0 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99242 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99243 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99244 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 0 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authin 99245 US Eacouster 0 0 0 50 50 50 50 50 0 0 0 0	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurition	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authern 99337 U.S Fincounter 0 0 0 50 50 50 50 50 0 0 Assessment for Authern 99337 U.S Fincounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99341 U.S Excounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99342 U.S Excounter 0 0 0 50 50 50 50 0 0 Assessment for Authern 99343 U.S Excounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authern 99343 U.S Fincounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Authern 99343 U.S Fincounter 0 0 0 50 50 50 50 50 0 0 0 0 0 0 0 0 0	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99337 U5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9342 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism Assessment for Autism 49345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49345 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 49347 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9347 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9348 U5 Encounter 0 0 0 50 50 50 50 0 Assessment for Autism 9349 U5 Bacounter 0 0 0 50 50 50 50 0 Assessment for Autism 9349 U5 Bacounter 0 0 0 50 50 50 50 0 Assessment for Autism 9349 U5 Bacounter 0 0 0 50 50 50 50 0 Assessment for Autism 9340 U5 30 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9350 U5 30 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9350 U5 30 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 9350 U5 70 Minutes 0 0 0 50 50 50 50 0  Modication Management Autism Autism 15 Minutes 0 0 0 50 50 50 50 0  Transportation Autism Aut	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism 99342   US Excounter 0 0 0 50 50 50 50 0 0 Assessment for Aurism 99342   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99343   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99344   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99345   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99347   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348   Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99348   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50 50 50 50 0 Assessment for Aurism 99349   US Excounter 0 0 0 50	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99343 Encounter 0 0 0 50 50 50 50 0 0 0 50 50 50 50 0 0 0 50 5	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 9344 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99343 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99344 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99344 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99344 U5 Encounter 0 0 0 SO SO SO SO O O Assessment 99345 Encounter 0 0 0 SO SO SO SO O O Assessment for Autism 99345 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99347 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99347 U5 Encounter 0 0 0 SO SO SO SO O O O Assessment for Autism 99348 Encounter 0 0 0 SO SO SO SO O O O O SO SO SO SO O O O	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99345 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99347 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99347 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99348 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Autism 99349 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment   Span	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         \$0	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         \$0 <td>Assessment for Autism</td> <td></td> <td>99349</td> <td>U5</td> <td>30 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
A state of the sta	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

## Chi

Children with Serious Emotional Disturbance	SUB-ELEMENT COST REPORT:	Fiscal Year 2014

Washtenaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	7	7	\$1,100	\$157	\$157	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	333	409	\$161,870	\$486	\$396	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	155	196	\$38,606	\$249	\$197	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1	1	\$197	\$197	\$197	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	55	7,443	\$465,336	\$8,461	\$63	135
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Processing Segrets   Processing Segrets   Processing Segrets   Processing Segrets   Processing Segrets	Washtenaw				Unit						
Communicy Josing Supports in Biological Principles   BEAS   Bacouster   1   38   \$5,000   \$5,000   \$50   \$	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   1982	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Non-District and Cycentral Support Services   MOMB   Processor   0   0   93   30   50   0   0   0   0   0   0   0   0	Community Living Supports in Independent living/own home		H0043		Encounter	1	35	\$5,200	\$5,200	\$149	35
Selt-stance Abec Libersity	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Deliver Abec Opposed Transmer   DMA (DMA) (A)   DMA (DMA) (A	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Part	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Relativist Transmer Plus Broits-is - Monitoring Autivities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Descriptionaire Multication Services - EBP only   12010	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Ciais Intervention	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill Bildling and Ont of Home Non Vocational Bildlinition	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Menters)	Crisis Intervention		H2011		Encounter	74	600	\$47,520	\$642	\$79	8
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Dubly)	Community Living Supports (15 Minutes)		H2015		Encounter	5	480	\$1,210	\$242	\$3	96
Dehavior Services   112016   TG   Per mile   0   0   S0   S0   S0   S0   S0   S0	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI). 112019 U.5 Per one-way trip 0 0 0 50 50 50 50 0 0 Early Intensive Behavioral Intervention (EIBI) H2019 U.5, TC Per one-way trip 0 0 0 50 50 50 50 50 0 0 Crisis Intervention (EIBI) H2010 Per one-way trip 0 0 0 50 50 50 50 50 0 0 Crisis Intervention (EIBI) H2011 Per one-way trip 7, 453 52,258 54,637 562 65 Waparound (SED Waiver) H2022 Per one-way trip 7, 453 52,258 54,637 562 65 Waparound (SED Waiver) H2022 TT Per one-way trip 0 0 0 50 50 50 50 50 0 0 Supported Employment Services H2022 TT Per one-way trip 0 0 0 50 50 50 50 50 0 0 Supported Employment Services H2023 Per one-way trip 0 0 0 50 50 50 50 0 0 Supported Employment Services H2023 Per one-way trip 0 0 0 50 50 50 50 0 0 Supported Employment Services (Applient Care 1900, 0914, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 0 Substance Abuse Services Cupatient Care 1900, 0914, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 0 Substance Abuse Cutpatient Care 1900, 0904, 0914, 1915 Per Mile 0 0 0 50 50 50 50 0 0 Substance Abuse Cutpatient Care 1900, 0904, 0914, 1915 Per Mile 0 0 0 50 50 50 50 0 0 Substance Abuse Cutpatient Care 1900, 0904, 0914 Pl203 Refer to code descriptions. 0 0 0 50 50 50 50 0 0 Substance Abuse Cutpatient Care 1900, 0904, 0914, 1915 Per Mile 1900, 0915, 0916, 0919 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 0 0 0 50 50 50 50 50 50 0 Per Mile 1900, 0915, 0916, 0919 Per Mile 1900, 0915, 0916, 0919 Per Mile 1900,	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Part   Intensive Behavioral Intervention (EIB1)	Behavior Services		H2019		Per mile	1	8	\$127	\$127	\$16	8
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround (SED Waiver)	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wingaround (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound (SED Waiver)	Wraparound		H2021		Per one-way trip	7	453	\$28,258	\$4,037	\$62	65
Number   N	Wraparound (SED Waiver)		H2022		Per one-way trip	4	38	\$10,220	\$2,555	\$269	10
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2027   Per Mile   0   0   S0   S0   S0   S0   D0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0905, 0916, 0919   H2036   Encounter Session at least 45 min   1   1   549   549   549   1   1   1   1   1   1   1   1   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         1         \$49         \$49         \$49         \$1           Transportation         \$0209         Encounter         0         0         \$0 <t< td=""><td>Substance Abuse: Outpatient Care</td><td></td><td>H2035</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	1	\$49	\$49	\$49	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         23         200         \$17,502         \$761         \$88         9           Family Training         \$5111         HA         Days         0         0         \$0	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training S5111 HA Days 0 0 \$0 \$0 \$0 \$0 0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	23	200	\$17,502	\$761	\$88	9
Family Training         S5111         HM         Days         0         0         \$0         \$0         \$0         \$0         \$0         0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

Service Category         Revenue Code         HCPCS Code         Modifier         Measure         Cases         Units         Cost         Cost/Case           Foster Care         \$5140         Days         0         0         \$0         \$0           Foster Care         \$5145         Days         0         0         \$0         \$0	Cost/Unit Unit/Ca \$0 \$0	Cost/Case	Cost	Units	Cases	Measure	Modifier	HCPCS Code	Revenue Code	Service Category
										Bet vice category
Foster Core S145 Dove 0 0 0 0 0 0	\$0	\$0	\$0	0	0	Days		S5140		Foster Care
105th Call Days 0 0 50 50	4.0	\$0	\$0	0	0	Days		S5145		Foster Care
Respite S5150 Days 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Days		S5150		Respite
Respite         S5151         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Encounter		S5151		Respite
Personal Emergency Response System (PERS) S5160 Encounter 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Encounter		S5160		Personal Emergency Response System (PERS)
Personal Emergency Response System (PERS)         \$5161         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Encounter		S5161		Personal Emergency Response System (PERS)
Environmental Modification S5165 Face to Face Contact 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Face to Face Contact		S5165		Environmental Modification
Enhanced Medical Equipment-Supplies S5199 Per Service 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Per Service		S5199		Enhanced Medical Equipment-Supplies
Occupational or Physical Therapy         S8990         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Encounter		S8990		Occupational or Physical Therapy
Health Services         \$9445         15 Minutes         0         0         \$0         \$0	\$0	\$0	\$0	0	0	15 Minutes		S9445		Health Services
Health Services         \$9446         15 minutes         0         0         \$0         \$0	\$0	\$0	\$0	0	0	15 minutes		S9446		Health Services
Health Services         \$9470         15 Minutes         0         0         \$0         \$0	\$0	\$0	\$0	0	0	15 Minutes		S9470		Health Services
Prevention Services - Direct Model         \$9482         48         1,934         \$120,701         \$2,515	\$62	\$2,515	\$120,701	1,934	48			S9482		Prevention Services - Direct Model
Intensive Crisis Stabilization-Enrolled Program S9484 15 Minutes 7 51 \$18,396 \$2,628	\$361	\$2,628	\$18,396	51	7	15 Minutes		S9484		Intensive Crisis Stabilization-Enrolled Program
Residential Room and Board         \$9976         Per diem         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Per diem		S9976		Residential Room and Board
Substance Abuse Services: Residential Room and Board S9976 Days 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Days		S9976		Substance Abuse Services: Residential Room and Board
Private Duty Nursing         T1000         Per Diem         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Per Diem		T1000		Private Duty Nursing
Private Duty Nursing         T1000         TD         Per Diem         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Per Diem	TD	T1000		Private Duty Nursing
Private Duty Nursing T1000 TE Encounter 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	Encounter	TE	T1000		Private Duty Nursing
Assessment T1001 Encounter 228 229 \$27,565 \$121	\$120	\$121	\$27,565	229	228	Encounter		T1001		Assessment
Health Services         T1002         15 Minutes         223         638         \$39,901         \$179	\$63	\$179	\$39,901	638	223	15 Minutes		T1002		Health Services
Respite Care         T1005         Encounter         13         6,373         \$22,051         \$1,696	\$3	\$1,696	\$22,051	6,373	13	Encounter		T1005		Respite Care
Respite Care         T1005         TD         Encounter         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Encounter	TD	T1005		Respite Care
Respite Care T1005 TE 15 minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 minutes	TE	T1005		Respite Care
Respite Care (Children's Waiver & SED Waiver)         T1005         TT         15 Minutes         0         0         \$0         \$0         \$0	\$0	\$0	\$0	0	0	15 Minutes	TT	T1005		Respite Care (Children's Waiver & SED Waiver)
Substance Abuse: Child Sitting Services T1009 15 minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 minutes		T1009		Substance Abuse: Child Sitting Services
Substance Abuse: Recovery Support Services T1012 15 Minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 Minutes		T1012		Substance Abuse: Recovery Support Services
Family Psycho-Education - EBP         T1015         Per Diem         0         0         \$0         \$0         \$0	\$0	\$0	\$0	0	0	Per Diem		T1015		Family Psycho-Education - EBP
Supports Coordination/Wrap Facilitation         T1016         Per Diem         3         82         \$12,311         \$4,104	\$150	\$4,104	\$12,311	82	3	Per Diem		T1016		Supports Coordination/Wrap Facilitation
Targeted Case Management         T1017         Per Diem         258         3,442         \$456,375         \$1,769	\$133	\$1,769	\$456,375	3,442	258	Per Diem		T1017		Targeted Case Management
Nursing Home Mental Health Monitoring         T1017         SE         15 Minutes         0         0         \$0         \$0         \$0	\$0	\$0	\$0	0	0	15 Minutes	SE	T1017		Nursing Home Mental Health Monitoring
Personal Care in Licensed Specialized Residential Setting T1020 15 Minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 Minutes		T1020		Personal Care in Licensed Specialized Residential Setting
Personal Care in Licensed Specialized Residential Setting T1020 TF 15 Minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 Minutes	TF	T1020		Personal Care in Licensed Specialized Residential Setting
Personal Care in Licensed Specialized Residential Setting T1020 TG Days 0 0 \$0 \$0	\$0	\$0	\$0	0	0	Days	TG	T1020		Personal Care in Licensed Specialized Residential Setting
Assessments T1023 15 Minutes 91 162 \$46,311 \$509	\$286	\$509	\$46,311	162	91	15 Minutes		T1023		Assessments
Prevention Services - Direct Model         T1027         Days         0         0         \$0         \$0	\$0	\$0	\$0	0	0	Days		T1027		Prevention Services - Direct Model
Enhanced Medical Supplies or Pharmacy T1999 Days 0 0 \$0 \$0	\$0	\$0	\$0	0	0	Days		T1999		Enhanced Medical Supplies or Pharmacy
Transportation         T2001         15 minutes         0         0         \$0         \$0         \$0	\$0	\$0	\$0	0	0	15 minutes		T2001		Transportation
Substance Abuse Services: Transportation T2001 15 Minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 Minutes		T2001		Substance Abuse Services: Transportation
Transportation         T2002         15 Minutes         0         0         \$0         \$0         \$0	\$0	\$0	\$0	0	0	15 Minutes		T2002		Transportation
Substance Abuse Services: Transportation T2002 15 Minutes 0 0 \$0 \$0 \$0	\$0	\$0	\$0	0	0	15 Minutes		T2002		Substance Abuse Services: Transportation

Washtenaw				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	2	2	\$290	\$145	\$145	1
Respite Care		T2037		Days	5	63	\$2,931	\$586	\$47	13
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	3	0	\$19,569	\$6,523	\$0	0
Total Population and Cost					590		\$2,952,300			

SUB-ELEMENT COST REPORT: Fiscal Year 2014

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

West Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	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	\$32,963	\$16,481	\$445	37
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	9	107	\$70,837	\$7,871	\$662	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			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

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hildren with Serious Emotional Disturbance SUB-E	ELEMENT COST REPORT: Fisc	scal Year 2014
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West Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			48	48	\$29,756	\$620	\$620	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	26	65	\$7,036	\$271	\$108	3
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	25	45	\$7,724	\$309	\$172	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	0	0	\$0	\$0	\$0	0
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	73	625	\$143,181	\$1,961	\$229	9
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	2	4	\$453	\$227	\$113	2
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	22	51	\$12,846	\$584	\$252	2
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Canada & Lagouaga Thanany		02521		E		0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	U	30	\$0	30	U

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Secola Linguage Therepy	West Michigan			Unit						
Secolis Language Therapy	Service Category	Revenue Code HCPC	S Code Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
	Speech & Language Therapy	9252	23	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
	Speech & Language Therapy	9252	24	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PXYCLEFIYS	Speech & Language Therapy	9252	26	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Audisin   Section	Speech & Language Therapy	926	10	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Sychological Testing by Technician	Psychological Testing PSYCH/PHYS	9610	)1	Encounter 45-50 Min	1	3	\$697	\$697	\$232	3
Assessment for Austrian   96162   US   30 Minutes   0   0   50   50   50   50   0	Assessment for Autism	9610	)1 U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Texating by Comp	Psychological Testing by Technician	9610	)2	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessments-Other   96110   30 Minutes   0   0   50   50   50   50   0	Assessment for Autism	9610	)2 U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments Other   96110   30 Minutes   0   0   50   50   50   0   0	Psychological Testing by Comp	9610	)3	30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other   96111	Assessments-Other	9610	)5	30 Minutes	0	0	\$0	\$0	\$0	0
Neuropochtes to by PsychPhys   96116	Assessments-Other	961	10	30 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by PsychPhys 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 Assessment for Autism 0 0 0 50 50 50 50 0 Assessment for Autism 96120 Assessment for Autism 0 0 0 50 50 50 50 0 Ass	Assessments-Other	961	1	45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 96118 U5 45 Minutes 0 0 0 50 50 50 50 0 0 Neuropsych test by Tech 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropsych test by Tech 96119 U5 60 Minutes 0 0 0 50 50 50 50 0 0 Neuropsych test Admin w Comp 96120 60 Minutes 0 0 0 50 50 50 50 50 0 0 Medication Administration 96372 60 Minutes 0 0 0 50 50 50 50 50 0 0 Medication Administration 96372 60 Minutes 0 0 0 50 50 50 50 50 0 0 Neuropsych test Admin w Comp 97002 Each Additional 30 0 0 50 50 50 50 50 50 0 0 Neuropsych test Admin w Comp 97002 Each Additional 30 0 0 50 50 50 50 50 50 0 0 Neuropsych test Admin w Comp 97002 Each Additional 30 0 0 50 50 50 50 50 50 50 50 50 50 50 5	Neurobehavioral Status Exam	961	16	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech   96119   60 Minutes   0   0   50   50   50   0   0	Neuropsych test by Psych/Phys	961	18	45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 96119 US 60 Minutes 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism	961	18 U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsychiest Admin w/Comp	Neuropsych test by Tech	961	19	60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         96372         60 Minutes         0         0         S0         S0         S0         0           Physical Therapy         97001         First 30-74 Min.         0         0         S0         S0         S0         0           Physical Therapy         97002         Each Additional 30 Minutes         0         0         S0         S0         S0         S0         0           Occupational Therapy         97003         Encounter         0         0         S0         S0<	Assessment for Autism	961	9 U5	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97001   First 30-74 Min.   0   0   S0   S0   S0   S0   D0	Neuropsych test Admin w/Comp	9612	20	60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy   97002   Each Additional 30	Medication Administration	9633	72	60 Minutes	0	0	\$0	\$0	\$0	0
Minutes   Minu	Physical Therapy	9700	)1	First 30-74 Min.	0	0	\$0	\$0	\$0	0
Occupational Thrapy         97004         Encounter         0         0         \$0 <t< td=""><td>Physical Therapy</td><td>9700</td><td>)2</td><td></td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Physical Therapy	9700	)2		0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97110         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td>9700</td> <td>)3</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy	9700	)3	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97112         Encounter         0         0         \$0 <td>Occupational Therapy</td> <td>9700</td> <td>)4</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational Therapy	9700	)4	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97113         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>971</td> <td>10</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	971	10	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97116         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>971</td> <td>12</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	971	12	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97124         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>971</td> <td>13</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	971	13	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97140         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>971</td> <td>16</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	971	16	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97150         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9712</td> <td>24</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9712	24	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97530         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9714</td> <td>10</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9714	10	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97532         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9715</td> <td>50</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9715	50	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97533         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9753</td> <td>30</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9753	30	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97535         Encounter         0         0         \$0         \$0         \$0         \$0         0           Occupational or Physical Therapy         97537         Encounter         0         0         \$0	Occupational or Physical Therapy	9753	32	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97537         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9753</td> <td>33</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9753	33	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97542         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy	9753	35	Encounter	0	0	\$0	\$0	\$0	0
	Occupational or Physical Therapy	9753	37	Encounter	0	0	\$0	\$0	\$0	0
	Occupational or Physical Therapy	9754	12	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97750         Encounter         0         0         \$0         \$0         \$0         \$0         0	Occupational or Physical Therapy	9775	50	Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy         97755         Encounter         0         0         \$0         <	Occupational Therapy	9775	55	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy         97760         Encounter         0         0         \$0 <td>Occupational or Physical Therapy</td> <td>9770</td> <td>60</td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Occupational or Physical Therapy	9770	60	Encounter	0	0	\$0	\$0	\$0	0
<u>C/O for Orthotic/Prosth Use or Physical Therapy</u> 97762 Encounter 0 0 \$0 \$0 \$0 \$0 0	C/O for Orthotic/Prosth Use or Physical Therapy	9770	52	Encounter	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

West Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Health Services		97804		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	153	522	\$131,330	\$858	\$252	3
Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	·	99233		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

West Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

# notional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

West Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	95	101	\$33,395	\$352	\$331	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	1	2	\$456	\$456	\$228	2
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	50	52	\$21,909	\$438	\$421	1
Assessment for Autism		H0031	U5	Encounter	0	0	\$0	\$0	\$0	0
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	42	42	\$8,759	\$209	\$209	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		Encounter	28	3,811	\$255,261	\$9,116	\$67	136
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Series Capager   Series   Se	West Michigan				Unit						
Comment   Direct Supports   Indicators   1908   1	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Page   100	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Post District and Operand Supprise Services   10046   1000   100	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selection Above: Conjunity Treasment   1904, 1904, 1905, 1906, 1907, 1906, 1907, 1906, 1907, 1	Respite		H0045		Encounter	0	0	\$0	\$0	\$0	0
Public Name Plan Review   10,000   10	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pachs   Pach	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Selvinic Transmer Min Renies - Montering Activities	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Congression Medication Services - EBP only	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Civil Intervention   1201	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Salib Building and Our of Home Non Vocational Habilitation   H2014   Encounter   0   0   50   50   50   70	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
	Crisis Intervention		H2011		Encounter	30	171	\$19,383	\$646	\$113	6
Community Living Supports (Daily)   H2016   Facounter   0   0   50   50   50   50   0   0   Community Living Supports (Daily)   H2016   TF   15 Minutes   0   0   50   50   50   50   0   0   0	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	99	7,328	\$62,435	\$631	\$9	74
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Behavior Services	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI)	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIBI)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention         H2020         Per one-way trip         0         0         \$50         \$50         \$0           Wraparound         H2021         Per one-way trip         0         0         \$50         \$50         \$50         0           Wraparound (SED Waiver)         H2022         Per one-way trip         0         0         \$50         \$50         \$50         \$60         \$60           Wraparound (SED Waiver)         H2022         TT         Per one-way trip         0         0         \$50         \$50         \$50         \$60         \$60         \$50         \$50         \$50         \$60         \$60         \$50         \$50         \$50         \$60         \$60         \$50         \$50         \$50         \$60         \$60         \$50	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Margaround   Mar	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services   H2023   Per one-way trip   0   0   50   50   50   0	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Outpatient Care   0900, 0914, 0915, 0916   H2030   Refer to code descriptions.   0   0   0   \$0   \$0   \$0   \$0   \$0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2035   Encounter Session at least op15, 0916, 0919   H2036	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   Modelation Review   M0064   Encounter   0   0   50   50   50   50   0	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation         \$0.00	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         88         698         \$153,344         \$1,743         \$220         8           Family Training         S5111         HA         Days         0         0         \$0 <t< td=""><td>Home Care Training to Home Care Client</td><td></td><td>S5108</td><td>U5</td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	88	698	\$153,344	\$1,743	\$220	8
Family Training S5111 HM Days 0 0 \$0 \$0 \$0 \$0 0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2014

Foster Care         S           Foster Care         S           Respite         S           Respite         S           Personal Emergency Response System (PERS)         S	PCS Code  5140  5145  5150  5151  5160  5161	Modifier	Measure Days Days Days Encounter	0 0 0 0	Units 0 0 0	\$0 \$0 \$0	Cost/Case \$0 \$0	Cost/Unit \$0 \$0	Unit/Case 0 0
Foster Care         S           Respite         S           Respite         S           Personal Emergency Response System (PERS)         S	5145 5150 5151 5160 5161		Days Days Encounter	0	0	\$0	\$0		
Respite         S           Respite         S           Personal Emergency Response System (PERS)         S	5150 5151 5160 5161		Days Encounter	0				\$0	0
Respite S Personal Emergency Response System (PERS) S	5151 5160 5161		Encounter		0	\$0			
Personal Emergency Response System (PERS)	5160 5161			0		ΨΨ	\$0	\$0	0
	5161		Parameter.		0	\$0	\$0	\$0	0
Perconal Emergency Pernones System (PEPS)			Encounter	0	0	\$0	\$0	\$0	0
Tersonal Energency Response System (LERS)	5165		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification S	2102		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies S	5199		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy S	8990		Encounter	0	0	\$0	\$0	\$0	0
Health Services S	9445		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services S	9446		15 minutes	0	0	\$0	\$0	\$0	0
Health Services S	9470		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model S	9482			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program S	9484		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board S	9976		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	9976		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	1000		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing T	1000	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing T	1000	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	1001		Encounter	9	9	\$3,317	\$369	\$369	1
Health Services	1002		15 Minutes	1	2	\$114	\$114	\$57	2
Respite Care T	1005		Encounter	73	9,075	\$102,911	\$1,410	\$11	124
Respite Care T	1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care T	1005	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	1005	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	1012		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	1015		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation T	`1016		Per Diem	5	59	\$2,908	\$582	\$49	12
Targeted Case Management	`1017		Per Diem	123	5,934	\$342,867	\$2,788	\$58	48
Nursing Home Mental Health Monitoring	`1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	1020		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	1020	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	1023		15 Minutes	10	10	\$5,522	\$552	\$552	1
Prevention Services - Direct Model T	1027		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy T	`1999		Days	0	0	\$0	\$0	\$0	0
Transportation T	2001		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation T	2001		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation T	2002		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation T	2002		15 Minutes	0	0	\$0	\$0	\$0	0

West Michigan										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2037		Days	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		15 Minutes	0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK	Per Diem	0	0	\$0	\$0	\$0	0
Wraparound Services		T5999		Per diem	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)				Encounter	0	0	\$0	\$0	\$0	0
Other				Month	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		Service	0	0	\$0	\$0	\$0	0

SUB-ELEMENT COST REPORT: Fiscal Year 2014

254

\$1,449,402

**Total Population and Cost** 

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

Woodlands				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	2	41	\$9,143	\$4,572	\$223	21
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	6	\$5,810	\$5,810	\$968	6
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	13	76	\$54,795	\$4,215	\$721	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Amount	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-025	58		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-030	)7			0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of items	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424				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 treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of visits	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 tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740				0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			Hour	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Encounter	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		# of tests	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		# of visits	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80100		Minutes	0	0	\$0	\$0	\$0	0
Drug Screen for Methadone Clients Only		80101		Minutes	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Per Screen	0	0	\$0	\$0	\$0	0

Woodlands		vanaa a		Unit		** .				******
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Autism		90785	U5	Per Screen	0	0	\$0	\$0	\$0	0
Assessment		90791			2	2	\$1,694	\$847	\$847	1
Assessment for Autism		90791	U5		0	0	\$0	\$0	\$0	0
Assessment		90792		Encounter	34	34	\$17,245	\$507	\$507	1
Assessment for Autism		90792	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		Encounter	9	16	\$1,987	\$221	\$124	2
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832		Encounter	1	1	\$48	\$48	\$48	1
Assessment		90833		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90833	U5	Encounter	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90834		Encounter	102	426	\$126,216	\$1,237	\$296	4
Substance abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834		Encounter	2	4	\$388	\$194	\$97	2
Assessment		90836		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90836	U5	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90837		Encounter 20-30 Min	13	22	\$9,195	\$707	\$418	2
Substance abuse: Outpatient Care		90837		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Assessment		90838		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		90838	U5	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis First 60 Minutes		90839		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter 75-80 Min	27	77	\$26,590	\$985	\$345	3
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Pharmacological Management (SED Waiver)		90863		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0901	90870		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy (Retired 1/1/14)		92506		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	,	92522		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0

Woodlands				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Speech & Language Therapy		92523		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92524		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96101	U5	Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Psychological Testing by Technician		96102		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Assessment for Autism		96102	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Psychological Testing by Comp		96103		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		30 Minutes	0	0	\$0	\$0	\$0	0
Assessments-Other		96111		45 Minutes	0	0	\$0	\$0	\$0	0
Neurobehavioral Status Exam		96116		45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Psych/Phys		96118		45 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96118	U5	45 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		60 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		96119	U5	60 Minutes	0	0	\$0	\$0	\$0	0
Neuropsych test Admin w/Comp		96120		60 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		60 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		First 30-74 Min.	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Each Additional 30 Minutes	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		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97112		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		Encounter	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use or Physical Therapy		97762		Encounter	0	0	\$0	\$0	\$0	0
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Serones Chargosy	Woodlands				Unit						
Assertance of Facility Services   9788   Facility of Sept. Additional 15 of 9   9   90   90   90   90   90   90	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Beath Services   97804   Beat Actionnal   5	Assessment or Health Services		97802		Encounter	0	0	\$0	\$0	\$0	0
Marker   M	Assessment or Health Services		97803		First Hour	0	0	\$0	\$0	\$0	0
Substance Absort Components   9781   Securine   0   0   39   39   30   30   0   0   0   0   39   30   30	Health Services		97804			0	0	\$0	\$0	\$0	0
New Paris Education and Management   92091	Substance Abuse: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austrian   Sp203   U.S.   Riser   0   0   50   50   50   50   50   50	Substance Abuse: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Presett Fischalation and Management	New Patient Evaluation and Management		99201		Per Hour	0	0	\$0	\$0	\$0	0
Securement for Austriam   99202   U5   Hour   0   0   59   50   50   50   0	Assessment for Autism		99201	U5	Hour	0	0	\$0	\$0	\$0	0
New Parlsent Foulantion and Management	New Patient Evaluation and Management		99202		Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Authon	Assessment for Autism		99202	U5	Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   0	New Patient Evaluation and Management		99203		Per Hour	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99204   Encounter   0   0   50   50   50   0   0	Assessment for Autism		99203	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Anxism 99204 105 115 116 117 117 118 118 118 118 118 118 118 118	Substance Abuse: New Patient Evaluation and Management		99203		Encounter	0	0	\$0	\$0	\$0	0
Substance Abose: New Patient Evaluation and Management	New Patient Evaluation and Management		99204		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management   99205   U5   Per Hour   0   0   50   50   50   50   0   0   Assessment for Aurism   99205   U5   Per Hour   0   0   0   50   50   50   0   0   50   50   0	Assessment for Autism		99204	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99205 U5 Per Hour 0 0 0 50 50 50 50 0 0 50 50 50 0 50 50	Substance Abuse: New Patient Evaluation and Management		99204		Per Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: New Patient Evaluation and Management   99205	New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99211   US   Encounter   0   0   S0   S0   S0   0   0   S0   S0   S0   0	Assessment for Autism		99205	U5	Per Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 99211 U5 Encounter 0 0 0 50 50 50 50 0 0 Established Patient Evaluation and Management 99212 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment for Autism 99213 U5 Encounter 54 115 \$155.89 528 \$133 2 2 Assessment for Autism 99213 U5 Encounter 0 0 0 50 50 50 50 50 50 50 50 50 50 50	Substance Abuse: New Patient Evaluation and Management		99205		Hour	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99212	Established Patient Evaluation and Management		99211		Per Hour	1	1	\$94	\$94	\$94	1
Assessment for Autism 99212 U5 Encounter 0 0 0 50 50 50 50 0 0 Established Patient Evaluation and Management 99213 U5 Encounter 54 115 \$15,289 \$283 \$133 2 2 Assessment for Autism 99213 U5 Encounter 0 0 0 \$80 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99211	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99213   U5   Encounter   0   0   50   50   50   0   0   0   0	Established Patient Evaluation and Management		99212		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99213 U5 Encounter 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Assessment for Autism		99212	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99214   15 Minutes   1   1   \$225	Established Patient Evaluation and Management		99213		Encounter	54	115	\$15,289	\$283	\$133	2
Assessment for Autism	Assessment for Autism		99213	U5	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management   99215   15 Minutes   0   0   \$0   \$0   \$0   \$0   \$0   \$0	Established Patient Evaluation and Management		99214		15 Minutes	1	1	\$225	\$225	\$225	1
Assessment for Autism   99215   U5   15 Minutes   0   0   0   50   \$0   \$0   0   0   0   0   0   0   0	Assessment for Autism		99214	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99221         15 Minutes         4         4         4         \$362         \$91         \$91         1           Additional Codes-Physician Services         99222         15 Minutes         3         4         \$357         \$119         \$89         1           Additional Codes-Physician Services         99223         Encounter         4         4         \$352         \$88         \$88         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Established Patient Evaluation and Management		99215		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99222         15 Minutes         3         4         \$357         \$119         \$89         1           Additional Codes-Physician Services         99223         Encounter         4         4         4         \$352         \$88         \$88         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0	Assessment for Autism		99215	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99223         Encounter         4         4         4         \$352         \$88         \$88         1           Additional Codes-Physician Services         99224         15 Minutes         0         0         \$0 <th< td=""><td>Additional Codes-Physician Services</td><td></td><td>99221</td><td></td><td>15 Minutes</td><td>4</td><td>4</td><td>\$362</td><td>\$91</td><td>\$91</td><td>1</td></th<>	Additional Codes-Physician Services		99221		15 Minutes	4	4	\$362	\$91	\$91	1
Additional Codes-Physician Services         99224         15 Minutes         0         0         \$	Additional Codes-Physician Services		99222		15 Minutes	3	4	\$357	\$119	\$89	1
Additional Codes-Physician Services         99225         15 Minutes         0         0         \$	Additional Codes-Physician Services		99223		Encounter	4	4	\$352	\$88	\$88	1
Additional Codes-Physician Services         99226         15 Minutes         0         0         \$	Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99231         15 Minutes         6         24         \$1,910         \$318         \$80         4           Additional Codes-Physician Services         99232         15 Minutes         4         10         \$891         \$223         \$89         3           Additional Codes-Physician Services         99233         15 Minutes         6         11         \$979         \$163         \$89         2           Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99225</td> <td></td> <td>15 Minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Additional Codes-Physician Services		99225		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         99232         15 Minutes         4         10         \$891         \$223         \$89         3           Additional Codes-Physician Services         99233         15 Minutes         6         11         \$979         \$163         \$89         2           Assessment         99324         15 Minutes         0         0         \$0	Additional Codes-Physician Services		99226		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services         9923         15 Minutes         6         11         \$979         \$163         \$89         2           Assessment         99324         15 Minutes         0         0         \$	Additional Codes-Physician Services		99231		15 Minutes	6	24	\$1,910	\$318	\$80	4
Assessment         99324         15 Minutes         0         0         \$0 <td>Additional Codes-Physician Services</td> <td></td> <td>99232</td> <td></td> <td>15 Minutes</td> <td>4</td> <td>10</td> <td>\$891</td> <td>\$223</td> <td>\$89</td> <td>3</td>	Additional Codes-Physician Services		99232		15 Minutes	4	10	\$891	\$223	\$89	3
Assessment for Autism 99324 U5 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Additional Codes-Physician Services		99233		15 Minutes	6	11	\$979	\$163	\$89	2
	Assessment		99324		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment 99325 15 Minutes 0 0 \$0 \$0 \$0 \$0 0	Assessment for Autism		99324	U5	15 Minutes	0	0	\$0	\$0	\$0	0
	Assessment		99325		15 Minutes	0	0	\$0	\$0	\$0	0

National	Woodlands				Unit						
December   1970   197	Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment for Authors   90325   US   15 Minures   0   0   90   90   90   90   90   90	Assessment for Autism		99325	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Martins 9027 US 30 Manures 0 0 0 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 50 0 A Assessment for Martins 9028 Finansier 0 0 0 50 50 50 50 50 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 50 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 50 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 50 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9028 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 0 0 A Assessment for Martins 9024 US Encounter 0 0 0 50 50 50 50 0 0 0 0 0 0 0 0 0 0 0	Assessment		99326		15 minutes	0	0	\$0	\$0	\$0	0
Macesseries for Audison	Assessment for Autism		99326	U5	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment   99/28     Excenter   0   0   50   50   50   50   50   0	Assessment		99327		15 Minutes	0	0	\$0	\$0	\$0	0
Accounter for Authors	Assessment for Autism		99327	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Accessment for Austrian	Assessment		99328		Encounter	0	0	\$0	\$0	\$0	0
According the Annium	Assessment for Autism		99328	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aurism	Assessment		99334		Encounter	0	0	\$0	\$0	\$0	0
Ausstrater for Authin 99335 U.S Faccounter 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99356 Excounter 0 0 0 30 50 50 50 0 0 Ausstrater for Authin 99357 U.S Executiver 0 0 0 30 50 50 50 0 0 Ausstrater for Authin 99337 U.S Executiver 0 0 0 30 50 50 50 0 0 Ausstrater for Authin 99337 U.S Executiver 0 0 0 30 50 50 50 0 0 Ausstrater for Authin 99337 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99341 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99341 U.S Executiver 0 0 0 50 50 50 50 0 0 0 Ausstrater for Authin 99342 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99342 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99343 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99343 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99344 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99344 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99344 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99344 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99345 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99346 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99349 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99349 U.S Executiver 0 0 0 50 50 50 50 0 0 Ausstrater for Authin 99349 U.S Executiver 0 0 0 50 50 50 50 0 0 0 Ausstrater for Authin 99349 U.S Executiver 0 0 0 50 50 50 50 0 0 0 Ausstrater for Authin 99340 U.S Executiver 0 0 0 50 50 50 50 0 0 0 Ausstrater for Authin 99340 U.S Executiver 0 0 0 50 50 50 50 0 0 0 0 Ausstrater for Authin 99340 U.S Executiver 0 0 0 50 50 50 50 0 0 0 0 0 0 50 50 50	Assessment for Autism		99334	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Aulism 99336 Becounter 0 0 0 50 50 50 50 0 0 Assessment for Aulism 99336 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99337 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99337 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99341 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99342 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99343 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99343 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99344 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 Assessment for Aulism 99345 U5 Encounter 0 0 0 50 50 50 50 50 0 0 0 0 50 50 50 5	Assessment		99335		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Authism 93136 US Pincounter 0 0 0 0 S0 S0 S0 S0 0 Assessment 93137 US Encounter 0 0 0 0 S0 S0 S0 S0 S0 0 Assessment Assessment 9341 US Encounter 0 0 0 0 S0 S0 S0 S0 S0 S0 0 Assessment Assessment For Authism 9341 US Encounter 0 0 0 0 S0 S	Assessment for Autism		99335	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99317	Assessment		99336		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Austism 99347 US Decounter 0 0 0 50 50 50 50 0 Assessment for Austism 99341 US Becounter 0 0 0 50 50 50 50 0 Assessment for Austism 99342 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99342 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99343 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99344 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99345 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99347 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99346 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99346 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99348 US Encounter 0 0 0 50 50 50 50 0 Assessment for Austism 99349 US Benounter 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US 70 Minutes 0 0 0 50 50 50 50 0 Assessment for Austism 99350 US 70 Minutes 0 0 0 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0 Transportation A0100 Encounter 0 0 0 50 50 50 50 50 0 Transportation A0110 Encounter	Assessment for Autism		99336	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment For Autism 99341 US Encounter 0 0 0 50 50 50 50 0 0 Assessment For Autism 99342 Encounter 0 0 0 0 50 50 50 50 0 0 0 Assessment For Autism 99342 US Encounter 0 0 0 50 50 50 50 50 0 0 0 0 50 50 50 5	Assessment		99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 9341 US Encounter 0 0 0 50 50 50 50 0 Assessment 9342 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9342 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9343 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9343 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9344 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9345 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9345 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9347 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9348 Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9348 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50 0 Assessment For Autism 9349 US Encounter 0 0 0 50 50 50 50 50	Assessment for Autism		99337	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342	Assessment		99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism 99342 U5 Encounter 0 0 0 50 50 50 50 0 0 Assessment 99443 Encounter 0 0 0 50 50 50 50 50 0 0 50 50 50 50 50	Assessment for Autism		99341	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   S0   S0   S0   S0   0	Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99343   U5   Encounter   0   0   S0   S0   S0   S0   0   O	Assessment for Autism		99342	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   50   50   50   0	Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism   99344   U5   Encounter   0   0   50   50   50   50   0	Assessment for Autism		99343	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99345         Encounter         0         0         80         80         80         0           Assessment for Autism         99345         U5         Encounter         0         0         50         80         80         0           Assessment         99347         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0	Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99345         U5         Encounter         0         0         S0         S0         S0         0           Assessment         99347         Encounter         0         0         S0	Assessment for Autism		99344	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99347         U5         Encounter         0         0         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99348         U5         Encounter         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99349         U5         30 Minutes         0         0         SO         SO         SO         SO         O           Assessment for Autism         99350         50 Minutes         0         0         SO         SO         SO         O           Assessment for Autism         99350         U5         70 Minutes         0         0         SO         SO         SO         SO         SO         SO         <	Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99347         U5         Encounter         0         0         50         50         50         0           Assessment         99348         Encounter         0         0         50         50         50         0           Assessment for Autism         99348         U5         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         Encounter         0         0         50         50         50         0           Assessment for Autism         99349         U5         30 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         50 Minutes         0         0         50         50         50         0           Assessment for Autism         99350         U5         70 Minutes         0         0         50         50         50         0           Medication Administration         99506         15 Minutes         0         0         50         50         50         0           Medication Management         99605         35 Minutes         0         0         50 <t< td=""><td>Assessment for Autism</td><td></td><td>99345</td><td>U5</td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Assessment for Autism		99345	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99348         Encounter         0         0         \$0	Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99348         U5         Encounter         0         0         \$0	Assessment for Autism		99347	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99349         Encounter         0         0         \$0	Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99349         U5         30 Minutes         0         0         \$0	Assessment for Autism		99348	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment         99350         50 Minutes         0         0         \$0 <td>Assessment</td> <td></td> <td>99349</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Assessment		99349		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism         99350         U5         70 Minutes         0         0         \$0	Assessment for Autism		99349	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration         99506         15 Minutes         0         0         \$0	Assessment		99350		50 Minutes	0	0	\$0	\$0	\$0	0
Medication Management         99605         35 Minutes         0         0         \$0	Assessment for Autism		99350	U5	70 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0080         15 Minutes         0         0         \$0	Medication Administration		99506		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0090         25 minutes         0         0         \$0	Medication Management		99605		35 Minutes	0	0	\$0	\$0	\$0	0
Transportation         A0100         35 Minutes         0         0         \$0	Transportation		A0080		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation         A0100         Encounter         0         0         \$0 <td>Transportation</td> <td></td> <td>A0090</td> <td></td> <td>25 minutes</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		A0090		25 minutes	0	0	\$0	\$0	\$0	0
Transportation         A0110         Encounter         0         0         \$0<	Transportation		A0100		35 Minutes	0	0	\$0	\$0	\$0	0
_ ·	Substance Abuse: Transportation		A0100		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Transportation A0110 Encounter 0 0 \$0 \$0 \$0 \$0 0	Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0
	Substance Abuse: Transportation		A0110		Encounter	0	0	\$0	\$0	\$0	0

Woodlands				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		A0120		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0130		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0140		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0170		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	1	84	\$1,305	\$1,305	\$16	84
Additional Codes-Transportation		A0427		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Encounter	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	1	1	\$194	\$194	\$194	1
Assessment		H0002		Encounter	74	76	\$24,868	\$336	\$327	1
Substance Abuse: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care	0906	H0015		Encounter	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0018		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Encounter	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		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		H0030		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	147	156	\$65,767	\$447	\$422	1
Assessment for Autism		H0031	U5	Encounter	1	1	\$495	\$495	\$495	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	77	78	\$9,800	\$127	\$126	1
Monitoring of Treatment - Clinician		H0032	TS	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		Encounter	45	60	\$5,628	\$125	\$94	1
Home Based Services		H0036		Encounter	61	4,678	\$464,115	\$7,608	\$99	77
Home Based Services		H0036	ST	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		H0038	TF	Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA		Encounter	0	0	\$0	\$0	\$0	0

Part	Woodlands				Unit						
	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Paper   Pape	Assertive Community Treatment (ACT)		H0039		Encounter	0	0	\$0	\$0	\$0	0
Part Parent and Operand Support Services   10046   100000000000000000000000000000000000	Community Living Supports in Independent living/own home		H0043		Encounter	0	0	\$0	\$0	\$0	0
Selement Abuse: Labermany   1908   1909	Respite		H0045		Encounter	2	58	\$12,359	\$6,179	\$213	29
Submark Abase Coopsision Treatment   1980, 1980, 1914, 19150   Escounter   1980, 1980, 1980, 1980, 1980, 1980   1980,	Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Pachsor Transmer Plan Review	Substance Abuse: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Published Francisco Plan Review - Montering Activities   H2000   TS   Excounter   0   0   50   50   50   50   0   0   Comprehensive Modication Services - EBP only   H2010   Excounter   0   0   50   50   50   50   0   0   0	Substance Abuse: Outpatient Treatment		H0050		Encounter	0	0	\$0	\$0	\$0	0
Congression Medication Services - EBF only   1930   10   10   10   10   10   10   10	Behavior Treatment Plan Review		H2000		Encounter	0	0	\$0	\$0	\$0	0
Crist Intervention   H2011   Riccounter   6   25   \$2.261   \$377   \$99   4	Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	0	0	\$0	\$0	\$0	0
Skill-Building and Out of Home Non-Vocational Habilitation   H2014   Executater   0   0   50   50   50   50   50   50	Comprehensive Medication Services - EBP only		H2010		Encounter	0	0	\$0	\$0	\$0	0
Encountery Lining Supports (15 Minutes)   13215	Crisis Intervention		H2011		Encounter	6	25	\$2,261	\$377	\$90	4
Community Living Supports (Daily)	Skill-Building and Out of Home Non Vocational Habilitation		H2014		Encounter	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)	Community Living Supports (15 Minutes)		H2015		Encounter	1	58	\$275	\$275	\$5	58
Community Living Supports (Daily)	Community Living Supports (Daily)		H2016		Encounter	0	0	\$0	\$0	\$0	0
Relavior Services   H2019	Community Living Supports (Daily)		H2016	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Applied Behavioral Intervention (ABI).   H2019   U.5   Per one-way trip   0   0   50   50   50   50   0	Community Living Supports (Daily)		H2016	TG	Per mile	0	0	\$0	\$0	\$0	0
Early Intensive Behavioral Intervention (EIIB)	Behavior Services		H2019		Per mile	0	0	\$0	\$0	\$0	0
Crisis Intervention	Applied Behavioral Intervention (ABI).		H2019	U5	Per one-way trip	0	0	\$0	\$0	\$0	0
Marparound   Mar	Early Intensive Behavioral Intervention (EIBI)		H2019	U5, TG	Per one-way trip	0	0	\$0	\$0	\$0	0
Wraparound (SED Waiver)	Crisis Intervention		H2020		Per one-way trip	0	0	\$0	\$0	\$0	0
Maraparound (SED Waiver)	Wraparound		H2021		Per one-way trip	0	0	\$0	\$0	\$0	0
Supported Employment Services   H2023   Per one-way trip   0   0   S0   S0   S0   S0   O	Wraparound (SED Waiver)		H2022		Per one-way trip	0	0	\$0	\$0	\$0	0
Mental Health Therapy	Wraparound (SED Waiver)		H2022	TT	Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0914, 0915, 0916, 0919   H2030   Refer to code descriptions.   0   0   0   S0   S0   S0   S0   0	Supported Employment Services		H2023		Per one-way trip	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	Mental Health Therapy		H2027			0	0	\$0	\$0	\$0	0
Home Based Services	Substance Abuse Services: Outpatient Care		H2027		Per Mile	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care         0900, 0906, 0914, 0915, 0916, 0919         H2035         Encounter Session at least 45 min         0         0         \$0	Clubhouse Psychosocial Rehabilitation Programs		H2030		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care   0900, 0906, 0914, 0915, 0916, 0919   H2036   Encounter Session at least 45 min   1   1   \$298   \$298   \$298   1	Home Based Services		H2033		Items	0	0	\$0	\$0	\$0	0
Medication Review         M0064         Encounter         1         1         \$298         \$298         \$298         1           Transportation         \$0209         Encounter         0         0         \$0	Substance Abuse: Outpatient Care		H2035		Encounter	0	0	\$0	\$0	\$0	0
Transportation         S0209         Encounter         0         0         \$0<	Substance Abuse: Outpatient Care		H2036			0	0	\$0	\$0	\$0	0
Transportation         S0215         Encounter         0         0         \$0<	Medication Review		M0064		Encounter	1	1	\$298	\$298	\$298	1
Substance Abuse Services: Transportation         S0215         15 Minutes         0         0         \$0	Transportation		S0209		Encounter	0	0	\$0	\$0	\$0	0
Home Care Training to Home Care Client         S5108         U5         Encounter         0         0         \$0 <th< td=""><td>Transportation</td><td></td><td>S0215</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></th<>	Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP         S5110         Encounter         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$1,152         \$1,152         \$1,82         \$2,88         \$4           Family Training         \$5111         HA         Days         0         0         \$0	Substance Abuse Services: Transportation		S0215		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training         S5111         Days         1         4         \$1,152         \$1,152         \$288         4           Family Training         S5111         HA         Days         0         0         \$0<	Home Care Training to Home Care Client		S5108	U5	Encounter	0	0	\$0	\$0	\$0	0
Family Training         S5111         HA         Days         0         0         \$0	Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
	Family Training		S5111		Days	1	4	\$1,152	\$1,152	\$288	4
Family Training         S5111         HM         Days         0         0         \$0	Family Training		S5111	HA	Days	0	0	\$0	\$0	\$0	0
	Family Training		S5111	НМ	Days	0	0	\$0	\$0	\$0	0

# SUB-ELEMENT COST REPORT: Fiscal Year 2014

				Unit						
Service Category	Revenue Code HCPC	S Code M	lodifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Foster Care	S514	10		Days	0	0	\$0	\$0	\$0	0
Foster Care	S514	15		Days	0	0	\$0	\$0	\$0	0
Respite	S51:	60		Days	0	0	\$0	\$0	\$0	0
Respite	S51:	51		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S510	50		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)	S510	51		Encounter	0	0	\$0	\$0	\$0	0
Environmental Modification	S510	55		Face to Face Contact	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	S519	19		Per Service	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	S899	00		Encounter	0	0	\$0	\$0	\$0	0
Health Services	S944	15		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	S94	6		15 minutes	0	0	\$0	\$0	\$0	0
Health Services	S94°	0		15 Minutes	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model	S94	32			0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program	S94	34		15 Minutes	0	0	\$0	\$0	\$0	0
Residential Room and Board	S99°	16		Per diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Residential Room and Board	S99°	16		Days	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00		Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00	TD	Per Diem	0	0	\$0	\$0	\$0	0
Private Duty Nursing	T10	00	TE	Encounter	0	0	\$0	\$0	\$0	0
Assessment	T10	)1		Encounter	0	0	\$0	\$0	\$0	0
Health Services	T10	)2		15 Minutes	60	145	\$13,387	\$223	\$92	2
Respite Care	T10	)5		Encounter	1	1,024	\$4,242	\$4,242	\$4	1,024
Respite Care	T10	)5	TD	Encounter	0	0	\$0	\$0	\$0	0
Respite Care	T10	)5	TE	15 minutes	0	0	\$0	\$0	\$0	0
Respite Care (Children's Waiver & SED Waiver)	T10	)5	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Child Sitting Services	T10	)9		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services	T10	12		15 Minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP	T10	15		Per Diem	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	T10	16		Per Diem	2	22	\$1,573	\$787	\$72	11
Targeted Case Management	T10	17		Per Diem	22	565	\$39,941	\$1,815	\$71	26
Nursing Home Mental Health Monitoring	T10	17	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20		15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20	TF	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting	T10	20	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	T10	23		15 Minutes	36	43	\$25,221	\$701	\$587	1
Prevention Services - Direct Model	T10	27		Days	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy	T19	99	-	Days	0	0	\$0	\$0	\$0	0
Transportation	T20	)1		15 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	)1		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation	T20	)2		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation	T20	)2		15 Minutes	0	0	\$0	\$0	\$0	0

Woodlands				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Transportation		T2003		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2003		Hour	0	0	\$0	\$0	\$0	0
Transportation		T2004		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2004		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		T2005		Encounter Face-to-Face, generally less than 10 minutes	0	0	\$0	\$0	\$0	0
Substance Abuse Services: Transportation		T2005		Per Mile	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		15 Minutes	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		15 Minutes	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention		T2034		Encounter	0	0	\$0	\$0	\$0	0
Respite Care		T2036		Encounter	2	14	\$1,326	\$663	\$95	7

SUB-ELEMENT COST REPORT: Fiscal Year 2014

T2037 \$0 \$0 \$0 0 Respite Care 0 0 Days T2038 0 0 \$0 \$0 \$0 0 Housing Assistance Days Enhanced Medical Equipment-Supplies \$0 \$0 T2039 15 Minutes 0 0 \$0 0 Goods and Services T5999 HK Per Diem 0 0 \$0 \$0 \$0 0 0 Wraparound Services T5999 Per diem 0 0 \$0 \$0 \$0 \$0 Pharmacy (Drugs and Other Biologicals) 0 0 \$0 \$0 0 Encounter Other 0 \$0 \$0 Month 0 \$0 0 Aggregate for 'J' Codes ALL 0 0 \$0 \$0 \$0 0 Service **Total Population and Cost** 314 \$947,778