

MDHHS
Non-Physician Behavioral Health
January 2017

HCPCS Code	Mod	Short Description	HCPCS Action Code	Rate	Comments
90785		Psytx Complex Interactive		\$5.79	
90791		Psych Diagnostic Evaluation	P	\$54.68	
90832*		Psytx Pt&/Family 30 Minutes		\$26.60	
90834*		Psytx Pt&/Family 45 Minutes		\$35.37	
90837*		Psytx Pt&/Family 60 Minutes	P	\$53.05	
90839		Psytx Crisis Initial 60 Min		\$55.43	
90840		Psytx Crisis Ea Addl 30 Min		\$26.45	
90847*		Family Psytx W/Patient		\$44.43	
90853*		Group Psychotherapy		\$10.70	
90887		Consultation With Family		\$37.00	
96101		Psycho Testing By Psych/Phys		\$33.44	Psychologist only
96102		Psycho Testing By Technician	P	\$26.01	
96103		Psycho Testing Admin By Comp		\$11.59	
96110		Developmental Screen W/Score		\$6.90	
96111		Developmental Test Extend	P	\$55.13	
96116		Neurobehavioral Status Exam	P	\$38.64	Psychologist only
96118		Neuropsych Tst By Psych/Phys	P	\$40.87	Psychologist only
96119		Neuropsych Testing By Tec	P	\$33.29	
96120		Neuropsych Tst Admin W/Comp		\$20.21	
96150		Assess Hlth/Behave Init		\$9.06	
96151		Assess Hlth/Behave Subseq	P	\$8.77	
96152		Intervene Hlth/Behave Indiv		\$8.32	
96153		Intervene Hlth/Behave Group		\$1.93	
96154		Interv Hlth/Behav Fam W/Pt		\$8.17	
99408		Audit/Dast 15-30 Min		\$14.71	
99409		Audit/Dast Over 30 Min		\$28.68	
G0505		Cog/func assessment outpt	A	\$98.67	

* Per MSA 15-44 Maximum of 20 combined visits in a 12 month period by all providers of behavioral health services

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The information on this page serves as a reference only. It does not guarantee that services are covered. Providers are instructed to refer to the Michigan Medicaid Provider Manual, MSA Bulletins and other relevant policy for specific coverage and reimbursement policies. This information can be found on the Medicaid Policy & Forms webpage. If there are discrepancies between the information on this page and the Provider Manual, such as rate or coverage determinations, they will be resolved in favor of the Provider Manual language.