

Michigan Department of Health and Human Services
Targeted Case Management Services for Recently Incarcerated Fee Schedule
July 2023

Code	Short Description	Modifier	Age Range	Rate	Effective Date**
G9012	Other Specified Case Mgmt			\$65.00	
G9012	Other Specified Case Mgmt	TS		\$50.00	
T1023	Program Intake Assessment			\$200.00	

**Effective date will only be populated when the rate begins after the published fee schedule date.

CPT codes, descriptions and two-digit modifiers only are copyright American Medical Association. All Rights Reserved.

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, MMP Bulletins and other relevant policy for specific coverage and reimbursement policies. This information can be found on the Medicaid Policy, Letters & Forms web page. If there are discrepancies between the information on this page and the Medicaid Provider Manual, such as rate or coverage determinations, they will be resolved in favor of the Medicaid Provider Manual language.