Highlighted cells indicate changes from previous publication.		AMH	AMH	ASA	ASA	ASA	ADD	СМН	CSA	CDD	
3 3 ***	•										1
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
90785	Interactive Evaluation with Complexity	х	х	Х	х	Х	Х	Х	х	Х	х
90785:GT	Interactive Evaluation with Complexity - Telemedicine	Х	х	х	х	Х	х	х	х	х	х
90791	Clinical Evaluation/Intake	х	х	х	х	х	х	х	х	х	х
90791:GT	Clinical Evaluation/Intake - Telemedicine	х	х	х	х	х	х	х	х	Х	Х
90792	Interactive Evaluation	х	х	х	х	х	х	х	х	х	х
90792:GT	Interactive Evaluation	х	х	х	х	х	х	х	х	х	х
90832	Individual Therapy (20-30 min.)		х	х	х	х	х	х	х	х	х
90832:GT	Individual Therapy (20-30 min.) - Telemedicine		х	Х	х	х	х	Х	х	х	х
90833	Individual Therapy (20-30 min.)MD		х	Х	х	Х	х	х	х	х	х
90833:GT	Individual Therapy (20-30 min.)MD - Telemedicine		х	X	x	Х	x	x	x	X	x
90834	Individual Therapy (45-50 min.)		X	X	X	X	X	X	X	X	X
90834:GT	Individual Therapy (45-50 min.) - Telemedicine		х	Х	х	Х	x	Х	x	X	x
90836	Individual Therapy (45-50 min.)MD		х	х	х	х	х	Х	х	х	х
90836:GT	Individual Therapy (45-50 min.)MD - Telemedicine		х	X	x	Х	x	x	x	X	x
90837	Individual Therapy (60 min.)		х	х	х	х	х	Х	х	х	х
90837:GT	Individual Therapy (60 min.) - Telemedicine		х	х	х	х	х	х	х	х	х
90838	Individual Therapy (60 min.)MD		Х	Х	х	Х	х	х	х	Х	х
90838:GT	Individual Therapy (60 min.)MD - Telemedicine		х	Х	х	х	х	Х	х	х	х
90839	Psychotherapy for Crisis (60 min.)		х	X	x	X	x	x	x	X	x
90840	Psychotherapy for Crisis (add-on)		х	Х	х	х	х	х	х	х	х
90846	Family Therapy without patient		х	Х	х	Х	х	Х	x	X	x
90847	Family Therapy with patient		х	х	х	Х	х	х	х	Х	х
90849	Group Therapy (Multiple Family Group)		х	Х	х	Х	Х		Х	Х	
90853	Group Therapy (non-multiple family group)		х	Х	х	х	х		х	х	
96101	Psychological Testing		х	Х	х	х	х	х	х	х	х
96105	Aphasia Assessment			Х				Х			х
96110	Developmental Testing (Limited)			Х					х		х
96111	Developmental Testing (Extended)			X					X		X
96116	Neurobehavioral Exam		х	х				х	х		х
96118	Neuropsychological testing battery		X	X				X	x		X
96372	Therapeutic, prophylactic, or diagnostic injection		х	Х	Х	х	х	Х	x	х	x
97001	Physical Therapy Evaluation		1	••				X	X		X
97002	Physical Therapy Re-Evaluation							X	x		X
97003	Occupational Therapy Evaluation							X	X		X
97004	Occupational Therapy Re-Evaluation	1	1			<del> </del>		X	X		X
97110	Physcial Therapy each 15 min.							X	x		X
97112	Physical Therapy (Nueromuscular re-education) each 15 min.					1		X	X		X

Page 1 of 7 Effective 07-01-15

Highlighted cells indicate changes from previous publication.			AMH	AMH	ASA	ASA	ASA	ADD	СМН	CSA	CDD
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
97113	Aquatic Therapy							Х			Х
97116	Gait Training each 15 min.							Х			х
97124	Massage Therapy each 15 min.							х			х
97140	Manual Therapy each 15 min.							х			х
97530	PT and OT Therapy							х			х
97750	Physical Performance Testing							х			х
97761	Prosthetic Training each 15 min.							х			Х
97762	Checkout for Orthotic/Prosthetic Use							х			х
99201	Evaluation and Management-Straight Forward - Problem Focused-New Patient	х	×	Х	х	х	х	х	х	х	х
99201:GT	Evaluation and Management-Straight Forward - Problem Focused-New Patient-Telemedicine	х	×	х	х	х	х	х	x	х	х
99202	Evaluation and Management-Expanded-New Patient	Х	Х	Х	Х	Х	Х	Х	Х	Х	X
99202:GT	Evaluation and Management-Expanded-New Patient - Telemedicine	х	x	х	х	х	x	х	х	x	х
99203	Evaluation and Management-Detailed-New Patient	Х	Х	х	х	Х	Х	х	х	Х	Х
99203:GT	Evaluation and Management-Detailed-New Patient - Telemedicine	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
99204	Evaluation and Management-Moderate-New Patient	Х	Х	X	х	Х	Х	X	Х	Х	Х
99204:GT	Evaluation and Management-Moderate-New Patient - Telemedicine	х	х	х	х	х	x	х	х	x	х
99205	Evaluation and Management-High-New Patient	Х	Х	X	х	Х	Х	X	Х	Х	Х
99205:GT	Evaluation and Management-High-New Patient - Telemedicine	Х	х	х	х	Х	х	х	х	х	х
99211	Evaluation and Management-Problem Focused-Established Patient		x	х	Х	х	х	х	х	х	х
99211:GT	Evaluation and Management-Problem Focused-Established Patient - Telemedicine		x	х	х	х	×	х	×	×	X
99212	Evaluation and Management-Expanded-Established Patient		Х	x	Х	X	Х	X	x	Х	X
99212:GT	Evaluation and Management-Expanded-Established Patient - Telemedicine		x	х	x	х	х	х	х	x	x
99213	Evaluation and Management-Detailed-Established Patient		Х	Х	Х	Х	Х	Х	Х	Х	Х
99213:GT	Evaluation and Management-Detailed-Established Patient - Telemedicine		х	х	х	х	х	х	х	х	х
99214	Evaluation and Management-Moderate-Established Patient		Х	Х	Х	Х	Х	Х	Х	Х	Х
99214:GT	Evaluation and Management-Moderate-Established Patient - Telemedicine		х	х	х	х	х	х	х	х	х
99215	Evaluation and Management-High-Established Patient		х	Х	Х	х	Х	Х	х	Х	Х
99215:GT	Evaluation and Management-High-Established Patient - Telemedicine		х	х	х	Х	х	х	х	х	х

Page 2 of 7 Effective 07-01-15

Highlighted cells indicate changes from previous publication.		AMH	AMH	ASA	ASA	ASA	ADD	CMH	CSA	CDD	
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
99221	Initial Hospital Care Low Severity		х	х	х	Х	х		х	х	
99222	Initial Hospital Care Mod Severity		x	X	X	X	X		X	X	
99223	Initial Hospital Care High Severity		×	X	X	X	X		X	X	<del>                                     </del>
99231	Subsequent Hospital Care per Day		x	X	X	X	X		X	X	<del>                                     </del>
99232	Subsequent Hospital Care per Day		x	X	X	X	X		X	X	<del></del>
99233	Subsequent Hospital Care per Day		X	X	X	X	X		X	X	<del>                                     </del>
99234	Observation or Inpatient Hospital Care, Low Complexity		x	X	X	×	X		X	X	<del></del>
99235	Observation or Inpatient Hospital Care, Moderate Complexity		x	X	X	X	X		X	X	
99236	Observation or Inpatient Hospital Care, High Complexity		X	X	X	X	X		X	X	<del></del>
99238	Hospital Discharge Day 30 min or less		x	X	X	×	X		X	X	<del></del>
99239	Hospital Discharge Day more than 30 min		×	X	X	X	X		X	X	
99241	Office Consultation	х	×	X	X	X	X		X	X	
99241:GT	Office Consultation - Telemedicine	X	x	X	X	X	X		X	X	
99242	Office Consultation	X	×	X	X	X	X		X	X	<del>                                     </del>
99242:GT	Office Consultation - Telemedicine	X	x	X	X	X	X		X	X	<del>                                     </del>
99243	Office Consultation	X	×	X	X	X	X		X	X	<del>                                     </del>
99243:GT	Office Consultation - Telemedicine	X	x	X	X	X	X		X	X	<del>                                     </del>
99244	Office Consultation	X	X	X	X	X	X		X	X	
99244:GT	Office Consultation - Telemedicine	X	x	X	X	X	X		X	X	
99245	Office Consultation	X	x	X	X	X	X		X	X	
99245:GT	Office Consultation - Telemedicine	X	x	X	X	X	X		X	X	
99251	Initial Inpatient Consultation		x	Х	x	X	x		х	X	
99251:GT	Initial Inpatient Consultation - Telemedicine		x	x	X	X	X		х	X	
99252	Initial Inpatient Consultation		х	х	х	Х	Х		х	Х	
99252:GT	Initial Inpatient Consultation - Telemedicine		х	х	х	х	х		х	х	
99253	Initial Inpatient Consultation		х	х	х	х	х		х	х	
99253:GT	Initial Inpatient Consultation - Telemedicine		х	х	х	х	х		х	х	
99254	Initial Inpatient Consultation		х	х	х	х	х		х	х	
99254:GT	Initial Inpatient Consultation - Telemedicine		х	х	х	х	х		х	х	
99255	Initial Inpatient Consultation		х	Х	х	х	х		х	х	
99255:GT	Initial Inpatient Consultation - Telemedicine		х	Х	х	х	х		х	х	
99304	E&M Initial Nursing Facility Initial Visit, Typically 25 Min.		х	Х	х	х	х		х	х	
99305	E&M Initial Nursing Facility Visit, Typically 35 Min. per Day		х	Х	х	х	х		х	х	
99306	E&M Initial Nursing Facility Visit, Typically 45 Min. per Day		х	Х	х	х	х		х	х	
99307	E&M Subsequent Nursing Facility Visit, Typically 10 Min. per Day		х	Х	х	х	х		х	х	
99308	E&M Subsequent Nursing Facility Visit, Typically 15 Min. per Day		х	Х	х	х	х		х	х	
99309	E&M Subsequent Nursing Facility Visit, Typically 25 Min. per Day		х	х	х	х	х		х	х	

Page 3 of 7 Effective 07-01-15

Highlighted cells indicate changes from previous publication.		AMH	AMH	ASA	ASA	ASA	ADD	СМН	CSA	CDD	
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
99310	E&M Subsequent Nursing Facility Visit, Typically 35 Min. per Day		х	Х	х	Х	Х		х	х	
99315	E&M Nursing Facility Discharge Day Management; 30 Min. Or Less		x	X	X	X	X		X	X	
99316	E&M Nursing Facility Discharge Day Management; More Than 30 Min.		X	X	X	X	X		X	X	
99318	E&M Patient involving an annual nursing facility		х	X	x	х	x		х	X	
99324	E&M New Patient Assisted Living Visit, Typically 20 Min.		х	X	X	х	X		х	X	
99325	E&M New Patient Assisted Living Visit, Typically 30 Min.		х	х	х	х	х		х	х	
99326	E&M New Patient Assisted Living Visit, Typically 45 Min.		х	х	х	х	х		х	х	
99327	E&M New Patient Assisted Living Visit, Typically 60 Min.		х	х	х	х	х		х	х	
99328	E&M New Patient Assisted Living Visit, Typically 75 Min.		х	х	х	х	х		х	х	
99334	E&M Established Patient Assisted Living Visit, Typically 15 Min.		х	х	х	х	х		х	х	
99335	E&M Established Patient Assisted Living Visit, Typically 25 Min.		х	х	х	х	х		х	х	
99336	E&M Established Patient Assisted Living Visit, Typically 40 Min.		х	х	х	х	х		х	х	
99337	E&M Established Patient Assisted Living Visit, Typically 60 Min.		х	х	х	х	х		х	х	
99341	E&M New Patient Home Visit, Typically 20 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99342	E&M New Patient Home Visit, Typically 30 Min.		Х	Х	Х	х	Х	Х	Х	Х	Х
99343	E&M New Patient Home Visit, Typically 45 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99344	E&M New Patient Home Visit, Typically 60 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99345	E&M New Patient Home Visit, Typically 75 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99347	E&M Established Patient Home Visit, Typically 15 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99348	E&M Established Patient Home Visit, Typically 25 Min.		Х	х	Х	х	Х	Х	Х	Х	Х
99349	E&M Established Patient Home Visit, Typically 40 Min.		Х	Х	Х	Х	Х	Х	Х	Х	Х
99350	E&M Established Patient Home Visit, Typically 60 Min.		Х	Х	Х	х	Х	Х	Х	Х	Х
H0010	Non-Hospital Medical Detox		Х		Х	Х	Х				
H0012:HB	SA Non-Medical Community Residential Treatment - Adult				х	х	х				
H0013	SA Medically Monitored Community Residential Treatment				х	х	х				
H0014	Ambulatory Detox				Х	Х	х				
H0015	SA Intensive Outpatient Program				х	х	х		х	Х	
H0019	Behavorial Health - Long Term Residential								Х	Х	
H0020	Opioid Treatment				Х						
H0035	Mental Health - Partial Hospitalization		Х						Х		
H0040	Assertive Community Treatment Program		Х								
H2011	Mobile Crisis Management	Х	Х	Х	Х	х	Х	х	Х	Х	Х
H2012-HA									х	Х	
H2014	Developmental Therapy Service Professional							Х			Х
H2014-HM	Developmental Therapy Service Paraprofessional							Х			Х
	Developmental Therapy Service Professional - Group							Х			Х
H2014-U1	Developmental Therapy Service Paraprofessional - Group							х			Х

Page 4 of 7 Effective 07-01-15

Highlighted cells indicate changes from previous publication.		AMH	AMH	ASA	ASA	ASA	ADD	СМН	CSA	CDD	
				1		_					
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
H2015·HT	Community Support Team		х		Х	х	Х				
H2017	Psychosocial Rehab Services		X			,					
	Residential Treatment - Level II - Program Type (Therapeutic Behavioral Service)								х	х	
H2020	Intensive In-Home Services	_	+								
H2022 H2033	Multisystemic Therapy	_		X					X	Х	
	, ,			Х					Х	Х	
	SA Halfway House				Х	Х	Х			Х	
	SA Comprehensive Outpatient Treatment Program				Х	Х	Х				
H2036	Medically Supervised or ADATC Detox		1		Х	Х	Х				
05445	Residential Treatment - Level II - Family Type (Foster Care								х	x	
S5145	Therapeutic Child)										
S9484	Facility Based Crisis Service		х	Х	Х	х	Х				
	Facility Based Crisis Service - Child								Х	Х	
	Targeted Case Management - Developmental Disability		1					Х			Х
T1023	Diagnostic Assessment	Х	Х	Х	Х	Х	Х	Х	х	Х	Х
	Diagnostic Assessment - telemedicine	Х	Х	Х	Х	Х	Х	Х	х	Х	Х
	Telehealth originating site facility fee	Х	Х	Х	Х	Х	Х	Х	х	Х	Х
YA125	Hourly Respite		1	X					Х	Х	Х
	Community Respite			Х					Х	Х	Х
	Psychiatric Residential Treatment Facility	_	-						Х	Х	
	Room and Board - Level III (1-4 Beds)								Х	Х	
YA233	Room and Board - Level III (5+ Beds)								х	Х	
	Room and Board - Level II (Age 5 or less)								Х		
	Room and Board - Level II (Age 6-12)								Х	Х	
	Room and Board - Level II (Age 13+)								Х	Х	
	Room and Board - Level IV (1-4 Beds)								Х	Х	
	Room and Board - Level IV (5+ Beds)								Х	X	
YA241	Wilderness Camp								Х		
YA254	Therapeutic Leave - Resid Level II - Therapeutic Foster Care		-						Х	Х	
YA255	Therapeutic Leave - Residential Level II/Program Type								Х	Х	
YA256	Therapeutic Leave - Residential Level III (1-4 Beds)				1				х	Х	
YA257	Therapeutic Leave - Residential Level III (5+ Beds)								Х	Х	
YA258	Therapeutic Leave - Residential Level IV (1-4 Beds)								Х	Х	
YA259	Therapeutic Leave - Residential Level IV (5+ Beds)								Х	Х	
YA263	Therapeutic Leave Room and Board - Level III (1-4 Beds)								Х	Х	
YA264	Therapeutic Leave Room and Board - Level III (5+ Beds)								Х	Х	
YA265	Therapeutic Leave Room and Board - Level II (Age 5 or less)								Х		

Page 5 of 7 Effective 07-01-15

Highlighte	Highlighted cells indicate changes from previous publication.		AMH	АМН	ASA	ASA	ASA	ADD	CMH	CSA	CDD
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
YA266	Therapeutic Leave Room and Board - Level II (Age 6-12)								х	Х	
YA267	Therapeutic Leave Room and Board - Level II (Age 13+)								X	X	
YA268	Therapeutic Leave Room and Board - Level IV (1-4 Beds)	+			<b>-</b>				X	X	
YA269	Therapeutic Leave Room and Board - Level IV (5+ Beds)	+			<b>-</b>				ł	X	
YM050	Personal Care	+							Х	X	.,
YM580	Day Supports	+									Х
YM600								X			
	Financial Support Services							Х			
YM645	Long Term Vocational Services MH/SUD		х	Х	Х	Х	Х		Х	Х	
YM686	Guardianship										
YM700	Independent Living-MR/MI							Х			
YM716	Individual Supports							Х			
YM725	Sup Liv – High		Х		Х	Х	Х	Х		Х	Х
YM755	Family Living – High							Х			Х
YM811	Supervised Living – 1 Resident							Х			
YM812	Supervised Living – 2 Resident							Х			
YM813	Supervised Living – 3 Resident							Х			
YM814	Supervised Living – 4 Resident							Х			
YM815	Supervised Living – 5 Resident							х			
YM816	Supervised Living – 6 Resident							Х			
YM850	Residential Supports							Х			
YP010	Hourly Respite – Individ		Х	Х				Х	Х	Х	Х
YP011	Hourly Respite – Group		Х	Х				Х	х	Х	Х
YP020	Per Asst – Individ							х			Х
YP118	Disaster/Emergency Services		Х								
YP485	Facility Based Crisis Program - Non-Medicaid		х	х	х	х	х	х			
YP610	Dev Day							х			х
YP620	ADVP							х			х
YP630	Supported Employment – Individual MH/SUD		х	х	х	х	х		х	х	
YP640	Supported Employment – Group IDD							х			х
YP650	Community Rehabilitation Program (Sheltered Workshop)	1	1		İ			Х	1	İ	Х
YP660	Day Activity	1	х					X	1		X
YP690	Drop In – Attend		X		<del> </del>	1		X	1		,,
YP692	Drop In – Cover		X					X	1		
YP710	Sup Liv – Low		X		Х	х	Х	X		Х	Х
YP720	Sup Liv – Mod.	1	×		X	X	X	X	1	X	X
YP730	Comm Respite	1	X	Х	^	^	^	X	х	X	X
YP740	Family Living – Low		X	^				X	^	^	X

Page 6 of 7 Effective 07-01-15

Highlighte	Highlighted cells indicate changes from previous publication.			AMH	ASA	ASA	ASA	ADD	СМН	CSA	CDD
Service Code	Service Name	GAP	AMI - Adult with Mental Illness	AMVET - Veterans and their Families	ASCDR - Injecting Drug User/Com municable Disease	ASTER - Adult SUD Treatment Engagement /Recovery	ASWOM - Adult SUD Women	ADSN - Adult IDD	CMSED - Child with Serious Emotional Disturbance	CSSAD - Child with Substance Use Disorder	CDSN - Child IDD
YP750	Familiy Living – Mod		х					Х			х
YP760	GP Liv – Low		х		х	х	х	х		х	х
YP770	GP Liv – Mod		Х		х	Х	х	Х		х	х
YP780	GP Liv – Hi		Х		х	Х	Х	Х		х	Х
YP790	Detox – Soc Set				х	Х	х				
YP820	Inpat Hosp		Х	Х	х	Х	Х		Х	Х	
YP821	3-Way Contract - IPU Bed		Х	Х	Х	Х	Х	Х			
YP822	3-Way Contract - Enhanced		Х	Х	х	Х	Х	Х			
YP830	Alcohol and/or Drug Assessment - non-licensed provider	Х			х	Х	Х			х	
YP831	Behavioral Health Counseling - non-licensed provider			Х	Х	Х	Х			Х	
YP832	Behavioral Health Counseling - Group Therapy - non-licensed provider			х	х	х	Х			Х	
YP833	Behavioral Health Counseling - Family Therapy with Client - non- licensed provider			х	х	x	x			x	
YP834	Behavioral Health Counseling - Family Therapy without Client - non- licensed provider			х	х	х	x			x	
YP835	Alcohol and/or Drug Group Counseling - non-licensed provider				Х	Х	Х			Х	
YP836	Mental Health Assessment - non-licensed provider			х	х	х	х			х	
YP851	Public Psychiatry - Administrative Functions		Х								
YP852	Public Psychiatry - Consultation and Service Functions		Х								
YA389	Long Term Vocational Support IDD							Х			Х
YA390	Supported Employment Individual IDD							х			х

Page 7 of 7 Effective 07-01-15