

# MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2010

STATUS	CODE	MOD	CURRENT DESCRIPTION	RATE EFF	RATE	DSCNT	RATE W/	CODE EFF	CODE END
				DATE		APP	DSCNT	DATE	DATE
			As of 10/1 2003, Per HIPAA regulations, provider type 85, 86, and 87 can not use physician based CPT codes. As of 04/10/2008 - Provider Type 26 (MIPS speech therapist) is no longer a viable provider type.						
<b>PROVIDER TYPE 08 - PSYCHIATRIST (MD - PHYSICIAN)</b>									
A	90801		Psychiatric diagnostic interview examination	10/1/2009	\$ 150.81	100%	\$ 150.81	7/1/2000	99/99/99
A	90802		Interactive psychiatric diagnostic interview examination using play equipment, physical devices, language interpreter, or other mechanisms of communication	10/1/2009	\$ 160.78	100%	\$ 160.78	7/1/2000	99/99/99
<b>PROVIDER TYPE 11 - PSYCHOLOGIST</b>									
A	90801		Psychiatric diagnostic interview examination	10/1/2009	\$ 150.81	100%	\$ 150.81	7/1/2000	99/99/99
A	90802		Interactive psychiatric diagnostic interview examination using play equipment, physical devices, language interpreter, or other mechanisms of communication	10/1/2009	\$ 160.78	100%	\$ 160.78	7/1/2000	99/99/99
A	90804		Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient	10/1/2009	\$ 66.14	100%	\$ 66.14	7/1/2000	99/99/99
A	90806		Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 45 to 50 minutes face-to-face with the patient	10/1/2009	\$ 92.59	100%	\$ 92.59	7/1/2000	99/99/99
A	90808		Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 75 to 80 minutes face-to-face with the patient	10/1/2009	\$ 136.16	100%	\$ 136.16	7/1/2000	99/99/99
A	90810		Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient	10/1/2009	\$ 70.27	100%	\$ 70.27	7/1/2000	99/99/99
A	90812		Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an office or outpatient facility, approximately 45 to 50 minutes face-to-face with the patient	10/1/2009	\$ 100.77	100%	\$ 100.77	7/1/2000	99/99/99
A	90814		Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an office or outpatient facility, approximately 75 to 80 minutes face-to-face with the patient	10/1/2009	\$ 146.15	100%	\$ 146.15	7/1/2000	99/99/99
A	90846		Family psychotherapy (without the patient present)	10/1/2009	\$ 86.41	100%	\$ 86.41	7/1/2000	99/99/99
A	90847		Family psychotherapy (conjoint psychotherapy) (with the patient present)	10/1/2009	\$ 107.37	100%	\$ 107.37	7/1/2000	99/99/99
A	90849		Multiple-family group psychotherapy	10/1/2009	\$ 32.31	100%	\$ 32.31	7/1/2000	99/99/99
A	90853		Group psychotherapy (other than multiple-family group)	10/1/2009	\$ 30.63	100%	\$ 30.63	7/1/2000	99/99/99
A	90857		Interactive group psychotherapy	10/1/2009	\$ 34.50	100%	\$ 34.50	7/1/2000	99/99/99
A	90875		Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); approximately 20 to 30 minutes	10/1/2009	\$ 69.85	100%	\$ 69.85	7/1/2000	99/99/99
A	90876		Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); approximately 45 to 50 minutes	10/1/2009	\$ 103.43	100%	\$ 103.43	7/1/2000	99/99/99
T	90885		Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes	10/1/2008	\$ 45.55	100%	\$ 45.55	7/1/2000	7/1/2008
A	90887		Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient	10/1/2009	\$ 82.40	100%	\$ 82.40	7/1/2000	99/99/99

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A	90889		Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purposes) for other physicians, agencies, or insurance carriers	2/1/2009	\$ 61.31	100%	\$ 61.31	7/1/2000	99/99/99
A	90901		Biofeedback training by any modality	10/1/2009	\$ 32.73	100%	\$ 32.73	7/1/2000	99/99/99
T	96100		Psychological testing (includes psychodiagnostic assessment of personality, psychopathology, emotionality, intellectual abilities, e.g., WAIS-R Rorschach, MMP) with interpretation and report per hour	5/1/2005	\$ 72.99	100%	\$ 72.99	7/1/2000	12/31/2005
A	96101		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and pschopathology, eg, MMPI, Rorshach, WAIS) per hour of psychologists's time, both face-to-face ime w/the patient and time interpreting test results and prepaing the report.	10/1/2009	\$ 83.64	100%	\$ 83.64	1/1/2006	99/99/99
A	96102		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and pschopathology, eg, MMPI and WAIS) with qualified health professional interpretation and report, administered by technician, per hour of technician time, face-to-face.	10/1/2009	\$ 49.87	100%	\$ 49.87	1/1/2006	99/99/99
A	96103		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and pschopathology, eg, MMPI) administered by a computer, w/a qaulified health care professional interpretation and report.	10/1/2009	\$ 45.00	100%	\$ 45.00	1/1/2006	99/99/99
A	96110		Development testing; limited (e.g., Developmental Screening Test II, Early Language Milestone Screen), with interpretation and report	10/1/2009	\$ 11.58	100%	\$ 11.58	7/1/2000	99/99/99
A	96111		Dvelopmental testing; extended (includes assessment of motor, language, socal, adaptive and/or cognitive functioning by standardized developmental instruments, e.g., Bayley Scales of Infant Development) with interpretation and report.	10/1/2009	\$ 128.11	100%	\$ 128.11	7/1/2000	99/99/99
T	96115		Neurobehavioral status exam (clinial assessment of thinking, reasoning and judgment, e.g., acquired knowledge, attention, memory, visual spatial abilities, language functions, planning) with interpretation and report, per hour	5/1/2005	\$ 72.99	100%	\$ 72.99	7/1/2000	12/31/2005
A	96116		Neurobehavioral status exam (clinial assessment of thinking, reasoning and judgment, e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities), per hour of the psychologist's or psyician's time, both face-to-face time w/the patient and time interpreting test results and preparing the report.	10/1/2009	\$ 93.73	100%	\$ 93.73	1/1/2006	99/99/99
T	96117		Neuropsychological testing battery (e.g., Halstead-Reitan, Luria, WAIS-R) with interpretation and report, per hour	5/1/2005	\$ 72.99	100%	\$ 72.99	7/1/2000	12/31/2005
A	96118		Neuropsychological testing (e.g., Halstead-Reitan, Neuropsychological Battery, Wechsler Memory Scals and Wisconsin Card Scoring Test), per hour of the psychologist's and physician's time, both face-to-face time w/the patient and time interpreting test results and preparing the report.	10/1/2009	\$ 105.84	100%	\$ 105.84	1/1/2006	99/99/99
A	96119		Neuropsychological testing (e.g., Halstead-Reitan, Neuropsychological Battery, Wechsler Memory Scals and Wisconsin Card Scoring Test), w/qaulified health care professional interpretation and reort, administered by technician, per hour of technician's time, face-to-face.	10/1/2009	\$ 71.27	100%	\$ 71.27	1/1/2006	99/99/99
A	96120		Neuropsychological testing (e.g., Wisconsin Card Scoring Test), administered by a computer with qualified health care professional intpretation and report.	10/1/2009	\$ 66.45	100%	\$ 66.45	1/1/2006	99/99/99
A	97532		Development of cognitive skills to improve attention, memory, problem solving, (includes compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes	10/1/2009	\$ 23.82	100%	\$ 23.82	1/1/2001	99/99/99
T	99361		Medcial conference by a physicaian with interdisciplinary team of health professionals or representatives of community agencies to coordinate activities of patient care (patient not present); approximately 30 minutes	5/1/2004	\$ 41.00	100%	\$ 41.00	7/1/2000	1/1/2008
T	99362		Medical conference by a physician with interdisciplinary team of health professionals or representatives of community agencies to coordinate activites of patient care (patient not present); approximately 60 minutes	5/1/2004	\$ 90.00	100%	\$ 90.00	7/1/2000	1/1/2008
<b>PROVIDER TYPE 13 - OCCUPATIONAL THERAPIST</b>									

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A	97003		Occupational therapy evaluation	10/1/2009	\$ 72.87	100%	\$ 72.87	7/1/2000	99/99/99
A	97004		Occupational therapy re-evaluation	10/1/2009	\$ 42.03	100%	\$ 42.03	7/1/2000	99/99/99
T	97010		Application of a modality to one or more areas; hot or cold packs	10/1/2007	\$ 4.85	100%	\$ 4.85	7/1/2000	9/30/2008
A	97032		Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	10/1/2009	\$ 15.91	100%	\$ 15.91	7/1/2000	99/99/99
A	97110		Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercise to develop strength and endurance, range of motion and flexibility	10/1/2009	\$ 27.60	100%	\$ 27.60	7/1/2000	99/99/99
A	97112		Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	10/1/2009	\$ 28.34	100%	\$ 28.34	7/1/2000	99/99/99
A	97116		Therapeutic procedure, one or more ares, each 15 minutes; gait training (includes stair climbing)	10/1/2009	\$ 24.11	100%	\$ 24.11	7/1/2000	99/99/99
A	97124		Therapeutic procedure, one or more ares, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	10/1/2009	\$ 21.95	100%	\$ 21.95	7/1/2000	99/99/99
A	97139		Unlisted therapeutic procedure (specify)	2/1/2009	\$ 15.04	100%	\$ 15.04	7/1/2000	99/99/99
A	97140		Manual therapy techniques (e.g., mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes	10/1/2009	\$ 25.54	100%	\$ 25.54	7/1/2000	99/99/99
A	97150		Therapeutic procedure(s), group (2 or more individuals)	10/1/2009	\$ 17.33	100%	\$ 17.33	7/1/2000	99/99/99
T	97504		Orthotic(s) fitting and training, upper extremity(ies), lower edtermity(ies), and/or trunk, each 15 minutes	5/1/2005	\$ 30.59	100%	\$ 30.59	7/1/2000	12/31/2005
T	97520		Prosthetic training, upper and/or lower extrmities, each 15 minutes	5/1/2005	\$ 27.94	100%	\$ 27.94	7/1/2000	12/31/2005
A	97530		Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	10/1/2009	\$ 29.02	100%	\$ 29.02	7/1/2000	99/99/99
A	97532		Development of cognitive skills to improve attention, memory, problem solving, (includes compensatory trasing), direct (one-on-one) patient contact by the provider, each 15 minutes	10/1/2009	\$ 23.82	100%	\$ 23.82	1/1/2001	99/99/99
A	97542		Wheelchair management (eg, assessment fitting training), each 15 minutes	10/1/2009	\$ 26.61	100%	\$ 26.61	7/1/2000	99/99/99
A	97750		Physical performance test or measurement (eg, musculoskeletal, functional capacity), w/written report, each 15 minutes	10/1/2009	\$ 28.29	100%	\$ 28.29	7/1/2000	99/99/99
A	97760		Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower edtermity(s), and/or trunk, each 15 minutes	10/1/2009	\$ 31.36	100%	\$ 31.36	1/1/2006	99/99/99
A	97761		Prosthetic training, upper and/or lower extrmities, each 15 minutes	10/1/2009	\$ 27.94	100%	\$ 27.94	1/1/2006	99/99/99
<b>PROVIDER TYPE 14 - PHYSICAL THERAPIST</b>									
A	97001		Physical therapy evaluation	10/1/2009	\$ 68.77	100%	\$ 68.77	7/1/2000	99/99/99
A	97002		Physical therapy re-evaluation	10/1/2009	\$ 36.83	100%	\$ 36.83	7/1/2000	99/99/99
T	97010		Application of a modality to one or more areas; hot or cold packs	10/1/2007	\$ 4.85	100%	\$ 4.85	7/1/2000	9/30/2008
A	97032		Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	10/1/2009	\$ 15.91	100%	\$ 15.91	7/1/2000	99/99/99
A	97110		Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercise to develop strength and endurance, range of motion and flexibility	10/1/2009	\$ 27.60	100%	\$ 27.60	7/1/2000	99/99/99
A	97112		Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	10/1/2009	\$ 28.34	100%	\$ 28.34	7/1/2000	99/99/99
A	97116		Therapeutic procedure, one or more ares, each 15 minutes; gait training (includes stair climbing)	10/1/2009	\$ 24.11	100%	\$ 24.11	7/1/2000	99/99/99

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A	97124		Therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	10/1/2009	\$ 21.95	100%	\$ 21.95	7/1/2000	99/99/99
A	97139		Unlisted therapeutic procedure (specify)	2/1/2009	\$ 15.04	100%	\$ 15.04	7/1/2000	99/99/99
A	97140		Manual therapy techniques (e.g., mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes	10/1/2009	\$ 25.54	100%	\$ 25.54	7/1/2000	99/99/99
A	97150		Therapeutic procedure(s), group (2 or more individuals)	10/1/2009	\$ 17.33	100%	\$ 17.33	7/1/2000	99/99/99
T	97504		Orthotic(s) fitting and training, upper extremity(ies), lower extremity(ies), and/or trunk, each 15 minutes	5/1/2005	\$ 30.59	100%	\$ 30.59	7/1/2000	12/31/2005
T	97520		Prosthetic training, upper and/or lower extremities, each 15 minutes	5/1/2005	\$ 27.94	100%	\$ 27.94	7/1/2000	12/31/2005
A	97530		Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	10/1/2009	\$ 29.02	100%	\$ 29.02	7/1/2000	99/99/99
A	97532		Development of cognitive skills to improve attention, memory, problem solving, (includes compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes	10/1/2009	\$ 23.82	100%	\$ 23.82	1/1/2001	99/99/99
A	97542		Wheelchair management (eg, assessment fitting training), each 15 minutes	10/1/2009	\$ 26.61	100%	\$ 26.61	7/1/2000	99/99/99
A	97750		Physical performance test or measurement (eg, musculoskeletal, functional capacity), w/written report, each 15 minutes	10/1/2009	\$ 28.29	100%	\$ 28.29	7/1/2000	99/99/99
A	97760		Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s), and/or trunk, each 15 minutes	10/1/2009	\$ 31.36	100%	\$ 31.36	1/1/2006	99/99/99
A	97761		Prosthetic training, upper and/or lower extremities, each 15 minutes	10/1/2009	\$ 27.94	100%	\$ 27.94	1/1/2006	99/99/99
<b>PROVIDER TYPE 15 - SPEECH/HEARING THERAPIST</b>									
A	92506		Evaluation of speech, language, voice, communication, and/or auditory processing	10/1/2009	\$ 114.67	100%	\$ 114.67	7/1/2000	99/99/99
A	92507		Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	10/1/2009	\$ 47.95	100%	\$ 47.95	7/1/2000	99/99/99
A	92508		Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals	10/1/2009	\$ 22.86	100%	\$ 22.86	7/1/2000	99/99/99
T	92510		Aural rehabilitation following cochlear implant (includes evaluation of aural rehabilitation status and hearing, therapeutic services) w/ or w/out speech processor programming	5/1/2005	\$ 137.33	100%	\$ 137.33	7/1/2000	12/31/2005
A	92520		Laryngeal function studies (eg, aerodynamic testing and acoustic testing)	10/1/2009	\$ 57.09	100%	\$ 57.09	7/1/2000	99/99/99
A	92526 *		Treatment of swallowing dysfunction and/or oral function for feeding	10/1/2009	\$ 75.86	100%	\$ 75.86	7/1/2000	99/99/99
A	92610		Evaluation of oral and pharyngeal swallowing function	10/1/2009	\$ 74.37	100%	\$ 74.37	1/1/2003	99/99/99
A	92626		Evaluation of auditory rehabilitation status; first hour (limited to individuals with Cochlear Implants or hearing aids to assess speech)	10/1/2009	\$ 77.09	100%	\$ 77.09	1/1/2006	99/99/99
A	92627		Evaluation of auditory rehabilitation status; each additional 15 minutes (List separately in addition to code for primary procedure)(limited to individuals with Cochlear Implants or hearing aids to assess speech)	10/1/2009	\$ 18.81	100%	\$ 18.81	1/1/2006	99/99/99
A	92630		Auditory rehabilitation; pre-lingual hearing loss (limited to individuals with Cochlear Implants or hearing aids to assess speech)	2/1/2009	\$ 43.49	100%	\$ 43.49	1/1/2006	99/99/99
A	92633		Auditory rehabilitation; post-lingual hearing loss (limited to individuals with Cochlear Implants or hearing aids to assess speech)	2/1/2009	\$ 43.49	100%	\$ 43.49	1/1/2006	99/99/99
<b>PROVIDER TYPE SA - SPEECH LANGUAGE PATHOLOGY ASSISTANT</b>									
A	92507		Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	2/1/2010	\$ 47.95	75%	\$ 35.96	2/1/2010	99/99/99

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A	92508		Treatment of speech, language, voice , communication, and/or auditory processing disorder; group, 2 or more individuals	2/1/2010	\$ 22.86	75%	\$ 17.15	2/1/2010	99/99/99
<b>PROVIDER TYPE 31 - PSYCHIATRIST (OSTEOPATH)</b>									
A	90801		Psychiatric diagnostic interview examination	10/1/2009	\$ 150.81	100%	\$ 150.81	7/1/2000	99/99/99
A	90802		Interactive psychiatric diagnostic interview examination using play equipment, physical devices, language interpreter, or other mechanisms of communication	10/1/2009	\$ 160.78	100%	\$ 160.78	7/1/2000	99/99/99
<b>PROVIDER TYPE 62 - AUDIOLOGIST</b>									
A	92551		Screening test, pure tone, air only	10/1/2009	\$ 9.99	100%	\$ 9.99	1/1/2005	99/99/99
A	92552		Pure tone audiometry (threshold); air only	10/1/2009	\$ 20.22	100%	\$ 20.22	1/1/2005	99/99/99
A	92553		Pure tone audiometry (threshold); Air and bone	10/1/2009	\$ 27.05	100%	\$ 27.05	1/1/2005	99/99/99
A	92555		Speech audiometry threshold	10/1/2009	\$ 15.03	100%	\$ 15.03	1/1/2005	99/99/99
A	92556		Speech audiometry threshold; with speech recognition	10/1/2009	\$ 23.24	100%	\$ 23.24	1/1/2005	99/99/99
A	92557		Comprehensive audiometry threshold evaluation and speech recognition (92553 & 92556 combined)	10/1/2009	\$ 43.61	100%	\$ 43.61	1/1/2005	99/99/99
A	92562		Loudness balance test, alternate binaural or monaural	10/1/2009	\$ 21.26	100%	\$ 21.26	1/1/2005	99/99/99
A	92563		Tone decay test	10/1/2009	\$ 19.19	100%	\$ 19.19	1/1/2005	99/99/99
A	92567		Tympanometry (impedance testing)	10/1/2009	\$ 16.98	100%	\$ 16.98	1/1/2005	99/99/99
A	92568		Acoustic reflex testing	10/1/2009	\$ 17.56	100%	\$ 17.56	1/1/2005	99/99/99
A	92571		Filtered speech test	10/1/2009	\$ 15.38	100%	\$ 15.38	1/1/2005	99/99/99
A	92572		Staggered spondaic word test	10/1/2009	\$ 16.22	100%	\$ 16.22	1/1/2005	99/99/99
A	92576		Synthetic sentence identification test	10/1/2009	\$ 19.83	100%	\$ 19.83	1/1/2005	99/99/99
A	92577		Stenger test, speech	10/1/2009	\$ 16.27	100%	\$ 16.27	1/1/2005	99/99/99
A	92579		Visual reinforcement audiometry (VRA)	10/1/2009	\$ 42.67	100%	\$ 42.67	1/1/2005	99/99/99
A	92582		Conditioning play audiometry	10/1/2009	\$ 38.47	100%	\$ 38.47	1/1/2005	99/99/99
A	92583		Select picture audiometry	10/1/2009	\$ 31.10	100%	\$ 31.10	1/1/2005	99/99/99
A	92585		Auditory evoked potentials forevoked response audiometry and/or testing of the central nervous system; comprehensive	10/1/2009	\$ 95.47	100%	\$ 95.47	1/1/2005	99/99/99
A	92587		Evoked otoacoustic emissions; limited (Single stimulus level, either transient or distortion products)	10/1/2009	\$ 36.65	100%	\$ 36.65	1/1/2005	99/99/99
A	92588		Comprehensive or diagnostic evaluation (comparison of transient and/or distortion product otoacoustiv emissions at multiple levels and frequencies)	10/1/2009	\$ 60.10	100%	\$ 60.10	1/1/2005	99/99/99
<b>PROVIDER TYPE 85 - LICENSED CLINICAL SOCIAL WORKER</b>									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	2/1/2009	\$ 32.05	100%	\$ 32.05	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	2/1/2009	\$ 7.20	100%	\$ 7.20	1/1/2004	99/99/99
A	H0004	HR	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/client pres/amb hsp 2 resid	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	2/1/2009	\$ 133.00	100%	\$ 133.00	1/1/2004	99/99/99

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			As of 10/1 2003, Per HIPAA regulations, provider type 85, 86, and 87 can not use physician based CPT codes. As of 04/10/2008 - Provider Type 26 (MIPS speech therapist) is no longer a viable provider type.						
<b>PROVIDER TYPE 86 - LICENSED MARRIAGE &amp; FAMILY THERAPIST</b>									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	2/1/2009	\$ 32.05	100%	\$ 32.05	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	2/1/2009	\$ 7.20	100%	\$ 7.20	1/1/2004	99/99/99
A	H0004	HR	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/client pres/amb hsp 2 resid	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	2/1/2009	\$ 133.00	100%	\$ 133.00	1/1/2004	99/99/99
<b>PROVIDER TYPE 87 - LICENSED PROFESSIONAL COUNSELOR</b>									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	2/1/2009	\$ 32.05	100%	\$ 32.05	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	2/1/2009	\$ 7.20	100%	\$ 7.20	1/1/2004	99/99/99
A	H0004	HR	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/client pres/amb hsp 2 resid	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	2/1/2009	\$ 35.01	100%	\$ 35.01	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	2/1/2009	\$ 133.00	100%	\$ 133.00	1/1/2004	99/99/99
<b>PROVIDER TYPE 88 - SCHOOL BASED GUIDANCE COUNSELOR</b>									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	2/1/2009	\$ 32.05	100%	\$ 32.05	10/1/2003	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	2/1/2009	\$ 7.20	100%	\$ 7.20	10/1/2003	99/99/99
A	H0004	HR	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/client pres/amb hsp 2 resid	2/1/2009	\$ 35.01	100%	\$ 35.01	10/1/2003	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	2/1/2009	\$ 35.01	100%	\$ 35.01	10/1/2003	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	2/1/2009	\$ 133.00	100%	\$ 133.00	10/1/2003	99/99/99
<b>PROVIDER TYPE 89 - SCHOOL BASED CERTIFIED SCHOOL PSYCHOLOGIST</b>									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	2/1/2009	\$ 32.05	100%	\$ 32.05	10/1/2003	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	2/1/2009	\$ 7.20	100%	\$ 7.20	10/1/2003	99/99/99
A	H0004	HR	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/client pres/amb hsp 2 resid	2/1/2009	\$ 35.01	100%	\$ 35.01	10/1/2003	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	2/1/2009	\$ 35.01	100%	\$ 35.01	10/1/2003	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	2/1/2009	\$ 133.00	100%	\$ 133.00	10/1/2003	99/99/99
<b>PROVIDER TYPE 92 - SCHOOL BASED BUS TRANSPORTATION</b>									
A	A0120		Non-emergency transportation: mini-bus, mountain area transportation	10/1/2009	\$ 7.36	100%	\$ 7.36	10/1/2003	99/99/99
A	A0120	TN	Non-emergency transportation: mini-bus, mountain area transportation (Rural/outside provider's customary service)	10/1/2009	\$ 8.05	100%	\$ 8.05	10/1/2003	99/99/99
A	A0130		Non-emergency transportation: wheelchair van	10/1/2009	\$ 12.36	100%	\$ 12.36	10/1/2003	99/99/99
A	A0130	TN	Non-emergency transportation: wheelchair van (Rural/outside provider's customary service)	10/1/2009	\$ 10.31	100%	\$ 10.31	10/1/2003	99/99/99
A	S0209		Wheelchair van, mileage, per mile	10/1/2009	\$ 1.70	100%	\$ 1.70	10/1/2003	99/99/99
A	S0209	TN	Wheelchair van, mileage, per mile (Rural/outside provider's customary service)	10/1/2009	\$ 1.84	100%	\$ 1.84	10/1/2003	99/99/99
A	S0215		Non-emergency transportation; mileage, per mile	10/1/2009	\$ 1.42	100%	\$ 1.42	10/1/2003	99/99/99
A	S0215	TN	Non-emergency transportation; mileage, per mile (Rural/outside provider's customary service)	10/1/2009	\$ 1.69	100%	\$ 1.69	10/1/2003	99/99/99

# MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2010

STATUS	CODE	MOD	CURRENT DESCRIPTION	RATE EFF	RATE	DSCNT	RATE W/	CODE EFF	CODE END
				DATE		APP	DSCNT	DATE	DATE
			As of 10/1 2003, Per HIPAA regulations, provider type 85, 86, and 87 can not use physician based CPT codes. As of 04/10/2008 - Provider Type 26 (MIPS speech therapist) is no longer a viable provider type.						
			<b>PROVIDER TYPE 93 - SCHOOL BASED ATTENDANT CARE</b>						
A	S5125		Attendant care services; per 15 minutes	10/1/2009	\$ 4.30	100%	\$ 4.30	10/1/2003	99/99/99
			<b>PROVIDER TYPE 94 - SCHOOL BASED NURSE (RN/LPN)</b>						
A	T1002		RN services, up to 15 minutes	2/1/2009	\$ 16.77	.5994	\$ 10.05	10/1/2003	99/99/99
A	T1003		LPN/LVN services, up to 15 minutes	2/1/2009	\$ 13.17	.5994	\$ 7.89	10/1/2003	99/99/99
* - 92526 was end dated in error beginning with the 3/26/07 code/rate spreadsheet; it has been an active code.									