

MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2019

STATUS	CODE	MOD	CURRENT DESCRIPTION	RATE EFF DATE	RATE	DSCNT APP	RATE W/ DSCNT	CODE EFF DATE	CODE END DATE
PROVIDER TYPE 08 - PSYCHIATRIST (MD - PHYSICIAN)									
A	90791		Psychiatric diagnostic evaluation	10/1/2018	\$ 119.09	100%	\$ 119.09	1/1/2013	99/99/99
A	90792		Psychiatric diagnostic evaluation with medical services	10/1/2018	\$ 133.01	100%	\$ 133.01	1/1/2013	99/99/99
PROVIDER TYPE 11 - PSYCHOLOGIST									
A	90791		Psychiatric diagnostic evaluation	10/1/2018	\$ 119.09	100%	\$ 119.09	1/1/2013	99/99/99
A	90792		Psychiatric diagnostic evaluation with medical services	10/1/2018	\$ 133.01	100%	\$ 133.01	1/1/2013	99/99/99
A	90832		Psychotherapy, 30 minutes with patient and/or family member	10/1/2018	\$ 57.87	100%	\$ 57.87	1/1/2013	99/99/99
A	90834		Psychotherapy, 45 minutes with patient and/or family member	10/1/2018	\$ 77.35	100%	\$ 77.35	1/1/2013	99/99/99
A	90837		Psychotherapy, 60 minutes with patient and/or family member	10/1/2018	\$ 116.01	100%	\$ 116.01	1/1/2013	99/99/99
A	90846		Family psychotherapy (without the patient present)	10/1/2018	\$ 98.27	100%	\$ 98.27	7/1/2000	99/99/99
A	90847		Family psychotherapy (conjoint psychotherapy) (with the patient present)	10/1/2018	\$ 102.26	100%	\$ 102.26	7/1/2000	99/99/99
A	90849		Multiple-family group psychotherapy	10/1/2018	\$ 34.18	100%	\$ 34.18	7/1/2000	99/99/99
A	90853		Group psychotherapy (other than multiple-family group)	10/1/2018	\$ 24.49	100%	\$ 24.49	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	10/1/2018	\$ 58.27	100%	\$ 58.27	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	10/1/2018	\$ 100.94	100%	\$ 100.94	7/1/2000	99/99/99
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	10/1/2018	\$ 82.13	100%	\$ 82.13	7/1/2000	99/99/99
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	10/1/2016	\$ 55.33	100%	\$ 55.33	7/1/2000	99/99/99
A	90901		Biofeedback training by any modality	10/1/2018	\$ 36.64	100%	\$ 36.64	7/1/2000	99/99/99
T	96101		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and psychopathology, eg, MMPI, Rorschach, WAIS) per hour of psychologist's time, both face-to-face time w/the patient and time interpreting test results and preparing the report.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018
T	96102		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and psychopathology, eg, MMPI and WAIS) with qualified health professional interpretation and report, administered by technician, per hour of technician time, face-to-face.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018
T	96103		Psychological Testing (including psychodiagnostic assessment of emotionally, intellectual abilities, personality and psychopathology, eg, MMPI) administered by a computer, w/a qualified health care professional interpretation and report.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018
A	96110		Development testing; limited (e.g., Developmental Screening Test II, Early Language Milestone Screen), with interpretation and report	10/1/2018	\$ 9.36	100%	\$ 9.36	7/1/2000	99/99/99
T	96111		Developmental testing; extended (includes assessment of motor, language, social, adaptive and/or cognitive functioning by standardized developmental instruments, e.g., Bayley Scales of Infant Development) with interpretation and report, event based	1/1/2019	\$ -	100%	\$ -	7/1/2000	12/31/2018
A	96116		Neurobehavioral status exam (clinical 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 physician's time, both face-to-face time w/the patient and time interpreting test results and preparing the report.	10/1/2018	\$ 87.36	100%	\$ 87.36	1/1/2006	99/99/99
T	96118		Neuropsychological testing (e.g., Halstead-Reitan, Neuropsychological Battery, Wechsler Memory Scales 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.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018

MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2019

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				DATE		APP	DSCNT	DATE	DATE
T	96119		Neuropsychological testing (e.g., Halstead-Reitan, Neuropsychological Battery, Wechsler Memory Scales and Wisconsin Card Scoring Test), w/qualified health care professional interpretation and report, administered by technician, per hour of technician's time, face-to-face.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018
A	96130		Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	1/1/2019	\$ 103.63	100%	\$ 103.63	1/1/2019	99/99/99
A	96131		Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	1/1/2019	\$ 78.86	100%	\$ 78.86	1/1/2019	99/99/99
A	96132		Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	1/1/2019	\$ 116.31	100%	\$ 116.31	1/1/2019	99/99/99
A	96133		Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	1/1/2019	\$ 88.72	100%	\$ 88.72	1/1/2019	99/99/99
A	96136		Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes	1/1/2019	\$ 41.37	100%	\$ 41.37	1/1/2019	99/99/99
A	96137		Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	1/1/2019	\$ 38.24	100%	\$ 38.24	1/1/2019	99/99/99
A	96138		Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes	1/1/2019	\$ 33.24	100%	\$ 33.24	1/1/2019	99/99/99
A	96139		Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	1/1/2019	\$ 33.24	100%	\$ 33.24	1/1/2019	99/99/99
T	96120		Neuropsychological testing (e.g., Wisconsin Card Scoring Test), administered by a computer with qualified health care professional interpretation and report.	1/1/2019	\$ -	100%	\$ -	1/1/2006	12/31/2018
A	G0515		Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes	10/1/2018	\$ 25.28	100%	\$ 25.28	3/1/2018	99/99/99
PROVIDER TYPE 13 - OCCUPATIONAL THERAPIST									
A	97032		Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	10/1/2018	\$ 14.47	100%	\$ 14.47	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	10/1/2018	\$ 28.57	100%	\$ 28.57	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	10/1/2018	\$ 32.51	100%	\$ 32.51	7/1/2000	99/99/99
A	97116		Therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)	10/1/2018	\$ 28.24	100%	\$ 28.24	7/1/2000	99/99/99
A	97124		Therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	10/1/2018	\$ 28.52	100%	\$ 28.52	7/1/2000	99/99/99
A	97139		Unlisted therapeutic procedure (specify)	10/1/2012	\$ 13.58	100%	\$ 13.58	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	10/1/2018	\$ 26.00	100%	\$ 26.00	7/1/2000	99/99/99
A	97150		Therapeutic procedure(s), group (2 or more individuals)	10/1/2018	\$ 17.11	100%	\$ 17.11	7/1/2000	99/99/99
A	97165		Occupational therapy evaluation, low complexity,	10/1/2018	\$ 80.09	100%	\$ 67.81	1/1/2017	99/99/99

MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2019

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A	97166		Occupational therapy evaluation, moderate complexity,	10/1/2018	\$ 80.09	100%	\$ 67.81	1/1/2017	99/99/99
A	97167		Occupational therapy evaluation, high complexity,	10/1/2018	\$ 80.09	100%	\$ 67.81	1/1/2017	99/99/99
A	97168		Re-evaluation of occupational therapy established plan of care,	10/1/2018	\$ 54.49	100%	\$ 44.81	1/1/2017	99/99/99
A	97530		Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	10/1/2018	\$ 37.64	100%	\$ 37.64	7/1/2000	99/99/99
A	97542		Wheelchair management (eg, assessment fitting training), each 15 minutes	10/1/2018	\$ 31.19	100%	\$ 31.19	7/1/2000	99/99/99
A	97750		Physical performance test or measurement (eg, musculoskeletal, functional capacity), w/written report, each 15 minutes	10/1/2018	\$ 35.05	100%	\$ 35.05	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	10/1/2018	\$ 43.54	100%	\$ 43.54	1/1/2006	99/99/99
A	97761		Prosthetic training, upper and/or lower extremities, each 15 minutes	10/1/2018	\$ 37.71	100%	\$ 37.71	1/1/2006	99/99/99
A	G0515		Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes	10/1/2018	\$ 25.28	100%	\$ 25.28	3/1/2018	99/99/99
PROVIDER TYPE 14 - PHYSICAL THERAPIST									
A	97032		Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	10/1/2018	\$ 14.47	100%	\$ 14.47	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	10/1/2018	\$ 28.57	100%	\$ 28.57	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	10/1/2018	\$ 32.51	100%	\$ 32.51	7/1/2000	99/99/99
A	97116		Therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)	10/1/2018	\$ 28.24	100%	\$ 28.24	7/1/2000	99/99/99
A	97124		Therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	10/1/2018	\$ 28.52	100%	\$ 28.52	7/1/2000	99/99/99
A	97139		Unlisted therapeutic procedure (specify)	10/1/2012	\$ 13.58	100%	\$ 13.58	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	10/1/2018	\$ 26.00	100%	\$ 26.00	7/1/2000	99/99/99
A	97150		Therapeutic procedure(s), group (2 or more individuals)	10/1/2018	\$ 17.11	100%	\$ 17.11	7/1/2000	99/99/99
A	97161		Physical therapy evaluation: low complexity,	10/1/2018	\$ 74.24	100%	\$ 69.96	1/1/2017	99/99/99
A	97162		Physical therapy evaluation: moderate complexity,	10/1/2018	\$ 74.24	100%	\$ 69.96	1/1/2017	99/99/99
A	97163		Physical therapy evaluation: high complexity,	10/1/2018	\$ 74.24	100%	\$ 69.96	1/1/2017	99/99/99
A	97164		Re-evaluation of physical therapy established plan of care,	10/1/2018	\$ 50.18	100%	\$ 47.52	1/1/2017	99/99/99
A	97530		Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	10/1/2018	\$ 37.64	100%	\$ 37.64	7/1/2000	99/99/99
A	97542		Wheelchair management (eg, assessment fitting training), each 15 minutes	10/1/2018	\$ 31.19	100%	\$ 31.19	7/1/2000	99/99/99
A	97750		Physical performance test or measurement (eg, musculoskeletal, functional capacity), w/written report, each 15 minutes	10/1/2018	\$ 35.05	100%	\$ 35.05	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	10/1/2018	\$ 43.54	100%	\$ 43.54	1/1/2006	99/99/99
A	97761		Prosthetic training, upper and/or lower extremities, each 15 minutes	10/1/2018	\$ 37.71	100%	\$ 37.71	1/1/2006	99/99/99
A	G0515		Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes	10/1/2018	\$ 25.28	100%	\$ 25.28	3/1/2018	99/99/99
PROVIDER TYPE 15 - SPEECH/HEARING THERAPIST									
A	92507		Treatment of speech, language, voice , communication, and/or auditory processing disorder; individual	10/1/2017	\$ 37.52	100%	\$ 37.52	7/1/2000	99/99/99
A	92508		Treatment of speech, language, voice , communication, and/or auditory processing disorder; group, 2 or more individuals	10/1/2018	\$ 10.97	100%	\$ 10.97	7/1/2000	99/99/99
A	92520		Laryngeal function studies (eg, aerodynamic testing and acoustic testing)	10/1/2018	\$ 71.23	100%	\$ 71.23	7/1/2000	99/99/99
A	92521		Evaluation of speech fluency (eg, stuttering, cluttering)	10/1/2018	\$ 100.85	100%	\$ 100.85	1/1/2014	99/99/99
A	92522		Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria)	10/1/2018	\$ 81.16	100%	\$ 81.16	1/1/2014	99/99/99

MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2019

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A	92523		Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (eg, receptive and expressive language)	10/1/2018	\$ 174.87	100%	\$ 174.87	1/1/2014	99/99/99
A	92524		Behavioral and qualitative analysis of voice and resonance	10/1/2018	\$ 77.82	100%	\$ 77.82	1/1/2014	99/99/99
A	92526		Treatment of swallowing dysfunction and/or oral function for feeding	10/1/2018	\$ 79.91	100%	\$ 79.91	7/1/2000	99/99/99
A	92610		Evaluation of oral and pharyngeal swallowing function	10/1/2018	\$ 79.83	100%	\$ 79.83	7/1/2000	99/99/99
A	92630		Auditory rehabilitation; pre-lingual hearing loss (limited to individuals with Cochlear Implants or hearing aids to assess speech)	10/1/2016	\$ 39.26	100%	\$ 39.26	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)	10/1/2016	\$ 39.26	100%	\$ 39.26	1/1/2006	99/99/99
PROVIDER TYPE SA - SPEECH LANGUAGE PATHOLOGY ASSISTANT									
A	92507		Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	10/1/2017	\$ 37.52	75%	\$ 28.14	2/1/2010	99/99/99
A	92508		Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals	10/1/2018	\$ 10.97	75%	\$ 8.23	2/1/2010	99/99/99
PROVIDER TYPE 31 - PSYCHIATRIST (OSTEOPATH)									
A	90791		Psychiatric diagnostic evaluation	10/1/2018	\$ 119.09	100%	\$ 119.09	1/1/2013	99/99/99
A	90792		Psychiatric diagnostic evaluation with medical services	10/1/2018	\$ 133.01	100%	\$ 133.01	1/1/2013	99/99/99
PROVIDER TYPE 62 - AUDIOLOGIST									
A	92551		Screening test, pure tone, air only	10/1/2018	\$ 11.31	100%	\$ 11.31	1/1/2005	99/99/99
A	92552		Pure tone audiometry (threshold); air only	10/1/2018	\$ 29.15	100%	\$ 29.15	1/1/2005	99/99/99
A	92553		Pure tone audiometry (threshold); Air and bone	10/1/2018	\$ 34.99	100%	\$ 34.99	1/1/2005	99/99/99
A	92555		Speech audiometry threshold	10/1/2018	\$ 22.01	100%	\$ 22.01	1/1/2005	99/99/99
A	92556		Speech audiometry threshold; with speech recognition	10/1/2018	\$ 34.99	100%	\$ 34.99	1/1/2005	99/99/99
A	92557		Comprehensive audiometry threshold evaluation and speech recognition (92553 & 92556 combined)	10/1/2018	\$ 35.16	100%	\$ 35.16	1/1/2005	99/99/99
A	92562		Loudness balance test, alternate binaural or monaural	10/1/2018	\$ 42.78	100%	\$ 42.78	1/1/2005	99/99/99
A	92563		Tone decay test	10/1/2018	\$ 28.51	100%	\$ 28.51	1/1/2005	99/99/99
A	92567		Tympanometry (impedance testing)	10/1/2018	\$ 13.45	100%	\$ 13.45	1/1/2005	99/99/99
A	92568		Acoustic reflex testing	10/1/2018	\$ 17.79	100%	\$ 17.79	1/1/2005	99/99/99
A	92571		Filtered speech test	10/1/2018	\$ 25.26	100%	\$ 25.26	1/1/2005	99/99/99
A	92572		Staggered spondaic word test	10/1/2018	\$ 48.62	100%	\$ 48.62	1/1/2005	99/99/99
A	92576		Synthetic sentence identification test	10/1/2018	\$ 34.67	100%	\$ 34.67	1/1/2005	99/99/99
A	92577		Stenger test, speech	10/1/2018	\$ 13.25	100%	\$ 13.25	1/1/2005	99/99/99
A	92579		Visual reinforcement audiometry (VRA)	10/1/2018	\$ 42.72	100%	\$ 42.72	1/1/2005	99/99/99
A	92582		Conditioning play audiometry	10/1/2018	\$ 62.52	100%	\$ 62.52	1/1/2005	99/99/99
A	92583		Select picture audiometry	10/1/2018	\$ 45.37	100%	\$ 45.37	1/1/2005	99/99/99
A	92585		Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive	10/1/2018	\$ 124.88	100%	\$ 124.88	1/1/2005	99/99/99
A	92587		Evoked otoacoustic emissions; limited (Single stimulus level, either transient or distortion products)	10/1/2018	\$ 20.04	100%	\$ 20.04	1/1/2005	99/99/99
A	92588		Comprehensive or diagnostic evaluation (comparison of transient and/or distortion product otoacoustic emissions at multiple levels and frequencies)	10/1/2018	\$ 30.61	100%	\$ 30.61	1/1/2005	99/99/99
PROVIDER TYPE 85 - LICENSED CLINICAL SOCIAL WORKER									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	10/1/2017	\$ 31.72	100%	\$ 31.72	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	10/1/2017	\$ 6.97	100%	\$ 6.97	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	10/1/2017	\$ 19.85	100%	\$ 19.85	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	10/1/2017	\$ 33.86	100%	\$ 33.86	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	10/1/2017	\$ 163.17	100%	\$ 163.17	1/1/2004	99/99/99

MEDICAID SCHOOL BASED CLAIMS RATES AS OF 1-1-2019

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PROVIDER TYPE 86 - LICENSED MARRIAGE & FAMILY THERAPIST									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	10/1/2017	\$ 31.72	100%	\$ 31.72	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	10/1/2017	\$ 6.97	100%	\$ 6.97	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	10/1/2017	\$ 19.85	100%	\$ 19.85	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	10/1/2017	\$ 33.86	100%	\$ 33.86	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	10/1/2017	\$ 163.17	100%	\$ 163.17	1/1/2004	99/99/99
PROVIDER TYPE 87 - LICENSED PROFESSIONAL COUNSELOR									
A	H0004		Behavioral health counseling and therapy, per 15 minutes (Individual)	10/1/2017	\$ 31.72	100%	\$ 31.72	1/1/2004	99/99/99
A	H0004	HQ	Behavioral health counseling and therapy, per 15 minutes (Individual); group setting	10/1/2017	\$ 6.97	100%	\$ 6.97	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	10/1/2017	\$ 19.85	100%	\$ 19.85	1/1/2004	99/99/99
A	H0004	HS	Behavioral health counseling and therapy, per 15 minutes (Individual); family/couple w/out client present	10/1/2017	\$ 33.86	100%	\$ 33.86	1/1/2004	99/99/99
A	H0031		Mental health assessment, by non-physician-event based	10/1/2017	\$ 163.17	100%	\$ 163.17	1/1/2004	99/99/99
PROVIDER TYPE 92 - SCHOOL BASED BUS TRANSPORTATION									
A	A0120		Non-emergency transportation: mini-bus, mountain area transportation	10/1/2017	\$ 6.99	100%	\$ 6.99	10/1/2003	99/99/99
A	A0120	TN	Non-emergency transportation: mini-bus, mountain area transportation (Rural/outside provider's customary service)	10/1/2017	\$ 7.64	100%	\$ 7.64	10/1/2003	99/99/99
A	A0130		Non-emergency transportation: wheelchair van	10/1/2017	\$ 11.74	100%	\$ 11.74	10/1/2003	99/99/99
A	A0130	TN	Non-emergency transportation: wheelchair van (Rural/outside provider's customary service)	10/1/2017	\$ 9.79	100%	\$ 9.79	10/1/2003	99/99/99
A	S0209		Wheelchair van, mileage, per mile	10/1/2017	\$ 1.62	100%	\$ 1.62	10/1/2003	99/99/99
A	S0209	TN	Wheelchair van, mileage, per mile (Rural/outside provider's customary service)	10/1/2017	\$ 1.75	100%	\$ 1.75	10/1/2003	99/99/99
A	S0215		Non-emergency transportation; mileage, per mile	10/1/2017	\$ 1.35	100%	\$ 1.35	10/1/2003	99/99/99
A	S0215	TN	Non-emergency transportation; mileage, per mile (Rural/outside provider's customary service)	10/1/2017	\$ 1.61	100%	\$ 1.61	10/1/2003	99/99/99
PROVIDER TYPE 93 - SCHOOL BASED ATTENDANT CARE									
A	S5125		Attendant care services; per 15 minutes	1/1/2019	\$ 4.82	100%	\$ 4.82	10/1/2003	99/99/99
PROVIDER TYPE 94 - SCHOOL BASED NURSE (RN/LPN)									
A	T1002		RN services, up to 15 minutes	10/1/2017	\$ 20.42	.5994	\$ 12.24	10/1/2003	99/99/99
A	T1003		LPN/LVN services, up to 15 minutes	10/1/2016	\$ 16.07	.5994	\$ 9.63	10/1/2003	99/99/99