

GOGEBIC COMMUNITY MENTAL HEALTH AUTHORITY

COST OF SERVICES

Board Approval January 26, 2010; Effective February 1, 2010

SERVICE	CODE	PROVIDER	UNIT	RATE	
1	ACT	H0039	ACT	15 minutes	\$ 57.58
2	ACT Doctor Med Review/Psychiatric	H0039	Doctor	15 minutes	\$ 57.58
3	Assessment/Screening	H0002	Outpatient	Encounter	\$ 344.81
4	Behavior Management Review	H2000	Committee	Encounter	\$ 379.45
5	Behavior Management Monitoring	H2000TS	Outpatient	Encounter	\$ 111.95
6	Community Inpatient	0100L	ALL	Day	\$ 662.00
7	Community Inpatient - ECT	0901	ALL		\$ 675.00
8	Community Living Supports	H2015	ALL	15 minutes	\$ 12.59
9	Community Living Supports	H2015	Highline	15 minutes	\$ 2.08
10	Community Living Supports-High Need	H2016TG	Group Homes	Day	\$ 193.62
11	Crisis Intervention Service	H2011	Outpatient	15 minutes	\$ 62.05
12	Enhanced Medical Equipment	S5199	CSM	Item	\$ 133.13
13	Enhanced Medical Supplies	T1999	CSM	Item	\$ 111.62
14	Family Therapy (no client present)	90846	Outpatient	Encounter	\$ 261.68
15	Family Therapy (patient present)	90847	Outpatient	Encounter	\$ 261.68
16	Family Therapy (multiply family)	90849	Dr	Encounter	\$ 410.56
17	Family Training	S5111	CSM	Encounter	\$ 205.36
18	Group Therapy/Co-Occurring	90853	Outpatient	Encounter/Group	\$ 140.17
19	Home-Based Services	H0036	Home-Based	15 minutes	\$ 52.75
20	Individual Therapy (20-30 Minutes)	90804	Outpatient	Encounter	\$ 121.43
21	Individual Therapy (45-50 Minutes)	90806	Outpatient	Encounter	\$ 239.66
22	Individual Therapy (75-80 Minutes)	90808	Outpatient	Encounter	\$ 323.26
23	Initial Assessment/Behavioral	H0031	Outpatient	Encounter	\$ 461.55
24	Injection Medication	J1630	Haldol	Up to 5 mg	\$ 1.88
25	Injection Medication	J1631	Haldol Decanoate	Per 50 mg	\$ 6.60
26	Injection Medication	J2680	Prolixin Decanoate	Up to 25 mg	\$ 8.45
27	Injection Medication	J2794	Risperidone Consta	.5 mg	\$ 9.77
28	Injection Medication	J1200	Diphenhydramine	Up to 50 mg	\$ 1.00
29	Inpatient Continued Stay, Preadmission	T1023	Outpatient	Encounter	\$ 604.19
30	Intepretation of Tests to Family	90887	Doctor	Encounter	\$ 374.48
31	Medication Administration	96372 (90772)	Doctor/Nurse	Encounter	\$ 87.39
32	Medication Review	90862	Doctor/Nurse	Encounter	\$ 268.48
33	Medication Training & Support	H0034	Nurse		\$ 67.29
34	Nursing Assessment/Evaluation	T1001	Nurse	Encounter	\$ 269.14
35	Occupational Therapy	97110-97535	OT	15 minutes	\$ 58.18
36	Occupational Therapy	S8990	OT	Encounter	\$ 144.28
37	Occupational Therapy Evaluation	97003	OT	Encounter	\$ 523.60
38	Occupational Therapy Re-Evaluation	97004	OT	Encounter	\$ 475.99
39	Patient Education (Group)	S9446	Nurse	Encounter/Group	\$ 117.69
40	Patient Education (Individual)	S9445	Nurse	Encounter	\$ 67.29
41	Peer Directed/Operated Services	H0038	Serenity Ctr	15 minutes/Group	\$ 6.21
42	Peer Drop-In-Service	H0023	Serenity Ctr	Day	\$ 51.12
43	Personal Care - Low Need	T1020	Group Homes	Day	\$ 13.36
44	Personal Care - Moderate Need	T1020TF	Group Homes	Day	\$ 55.10
45	Personal Care - High Need	T1020TG	Group Homes	Day	\$ 102.03
46	Prevocational Services/Habilitation	T2015HK	Highline	Hour	\$ 2.08
47	Psychiatric Assessment/Evaluation	90801	Doctor/Nurse	Encounter	\$ 761.76
48	Psychiatry Services By Dr. Cools at	99221-99231	Doctor	Day	\$ 81.10

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49	Psychoeducation Group	G0177	ACT	Encounter/Group	\$ 151.20
50	Psychoeducation Joining Session	T1015	ACT	Encounter	\$ 50.40
51	Registered Nurse Services	T1002	Nurse	Up to 15 minutes	\$ 67.29
52	Respite Care	T1005	Children's Waiver	15 minutes	\$ 5.08
53	Respite Care "Family Friend"	S5150	Family Friend	15 minutes	\$ 2.50
54	Skill Building	H2014	SE/Volunteer	15 minutes	\$ 22.63
55	Skill Building	H2014	Highline	15 minutes	\$ 2.08
56	State Hospital	0101S	Mt Pleasant	Day	\$ 157.78
57	State Hospital	0101S	CARO	Day	\$ 427.78
58	State Hospital	0101S	Kalamazoo	Day	\$ 392.22
59	State Hospital	0101S	Hawthorne	Day	\$ 168.89
60	Supported Employment	H2023	SE	Hour	\$ 22.92
61	Supports Coordination	T1016	CSM	15 minutes	\$ 50.50
62	Targeted Case Management	T1017	CSM	15 minutes	\$ 50.50
63	Targeted Case Management	T2023	Children's Waiver	Per Month	\$ 541.54
64	Treatment Planning	H0032	ALL	Encounter	\$ 387.16
65	Treatment Planning Monitoring	H0032TS	OT	Encounter	\$ 128.13
66	Vacation Respite	S5151	Children's Waiver	Day	\$ 486.86
67	Copier Costs-First Sheet				\$ 5.92
68	Copier Costs-Follow First Sheet				\$ 0.04