

**DWMHA Rates for MI Health Link
Effective April 1, 2018**

Procedure Code & Description	Modifier	Network Rate	Out of Network Rate
0912 - Partial Hospitalization		\$222.75	\$220.00
90785 - Interactive Complexity - Add on code; limited use per Code Chart		\$12.13	\$11.98
90791 - Psych Eval (no medical svc)		\$112.52	\$111.13
90792 - Psych Eval (w/medical svc)		\$126.39	\$124.83
90832 - Psychotherapy, 30 (16-37 mins)		\$54.57	\$53.90
90834 - Psychotherapy, 45 (38-52 mins)		\$73.02	\$72.12
90837 - Psychotherapy, 60 (53+ mins)		\$109.63	\$108.28
90839 - Psychotherapy for crisis, 60 min		\$114.28	\$112.87
90840 - Psychotherapy for crisis, each additional 30 minutes		\$54.57	\$53.90
90846 - Family Therapy Without Consumer Present		\$88.27	\$87.18
90847 - Family Therapy With Consumer Present		\$91.76	\$90.62
90853 - Group Therapy		\$21.94	\$21.67
92507 - Speech & Language, Individual		\$65.46	\$64.66
92508 - Speech & Language, Group		\$19.06	\$18.82
92521 - Speech & Language, evaluation of fluency		\$95.14	\$93.97
92522 - Speech & Language, evaluation of speech sound production		\$77.10	\$76.15
92523 - Evaluation of Speech Sound Production with evaluation of language comprehension		\$164.71	\$162.68
92610 - Speech/Language - Evaluation of oral & pharyngeal swallowing function		\$71.73	\$70.84
96101 - Psychological Testing		\$69.22	\$68.37
96102 - Psychological Testing, per hour		\$50.96	\$50.33
96110 - Developmental Screening		\$125.00	\$100.00
96111 - Developmental Testing		\$114.15	\$112.74
96116 - Neurobehavioral Status Exam, per hour		\$78.86	\$77.89
96372 - Medication Administration (injection)		\$16.99	\$16.78
97110 - OT/PT Strength ROM - Individual		\$75.52	\$74.59
97150 - OT Group Therapeutic Activities		\$15.29	\$15.10
97166 - OT Moderate Complexity		\$75.52	\$74.59
97167 - OT High Complexity		\$51.32	\$50.69
97168 - OT Evaluation		\$33.71	\$33.30
97530 - OT/PT Individual Therapeutic Activities		\$37.51	\$37.05
97533 - OT/PT Sensory Integrative Techniques, 15 minutes		\$28.54	\$28.18
97802 - Medical Nutrition Therapy, initial assessment and intervention, 15 minutes		\$28.84	\$28.49
97803 - Medical Nutrition Therapy, re-assessment and intervention, 15 minutes		\$25.07	\$24.76
99201 - E&M visit, new patient, 3 component review, 10 minutes.		\$37.51	\$37.05
99202 - E&M visit, new patient, 3 component review, 20 minutes.		\$63.07	\$62.30
99203 - E&M visit, new patient, 3 component review, 30 minutes.		\$91.48	\$90.35
99204 - E&M visit, new patient, 3 component review, 45 minutes.		\$139.38	\$137.66
99205 - E&M visit, new patient, 3 component review, 60 minutes.		\$175.66	\$173.50
99211 - E&M visit, established patient, brief.		\$17.85	\$17.63
99212 - E&M visit, established patient, 2 component review, 10 minutes		\$36.73	\$36.28
99213 - E&M visit, established patient, 2 component review, 15 minutes.		\$61.16	\$60.40
99214 - E&M visit, established patient, 2 component review, 25 minutes.		\$90.20	\$89.09

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99215 - E&M visit, established patient, 2 component review, 40 minutes.		\$121.99	\$120.48
99221 - Inpatient Subsequent Care by a physician		\$116.43	\$114.99
99222 - Inpatient Subsequent Care by a physician		\$145.90	\$144.10
99223 - Inpatient Subsequent Care by a physician		\$201.87	\$199.38
99231 - Inpatient Subsequent Care by a physician		\$62.65	\$61.87
99232 - Subsequent Hospital Care - 25 mins		\$91.06	\$89.94
99233 - Subsequent Hospital Care - 35 minutes		\$117.74	\$116.29
99238 - HOSPITAL DISCHARGE DAY		\$91.11	\$89.98
99305 - NURSING FACILITY SERVICES E&M, new, 3 components, 35 minutes.		\$110.24	\$108.88
99306 - NURSING FACILITY SERVICES E&M, new, 3 components, 45 minutes.		\$140.99	\$139.25
99307 - NURSING FACILITY SERVICES E&M, established, 2 components, 10 min.		\$37.61	\$37.14
99308 - NURSING FACILITY SERVICES E&M, established, 2 components, 15 min.		\$58.53	\$57.81
99309 - NURSING FACILITY SERVICES E&M, established, 2 components, 25 min.		\$77.44	\$76.49
99310 - NURSING FACILITY SERVICES E&M, established, 2 components, 35 min.		\$115.06	\$113.64
99334 - Domiciliary care, Rest Home E&M, established, 2 components, 15 minutes		\$50.80	\$50.18
99335 - Domiciliary care, Rest Home E&M, established, 2 components, 25 minutes		\$80.09	\$79.10
99336 - Domiciliary care, Rest Home E&M, established, 2 components, 40 minutes		\$114.72	\$113.30
99506 - Medication Administration, home visit for intramuscular injection		\$30.00	\$24.00
A0120 - Non-emergency transportation (one-way)		Charge	Charge
E1399 - Durable medical equipment, miscellaneous		Charge	Charge
G0177 - Family Psycho-Education, group, 45 minutes or more		\$50.00	\$40.00
H0002 - Brief Screening to Non-Inpatient Program		\$137.57	\$110.06
H0018 - Behavioral Health; Short-Term Residential (Crisis)		\$390.00	\$312.00
H0031 - Mental Health Assessment, by Non-Physician (BioPsychoSocial)	BI	\$240.00	\$192.00
H0031 - Mental Health Assessment, by Non-Physician (LOCUS)	LO	\$60.00	\$48.00
H0031 - Mental Health Assessment, by Non-Physician (SIS)	HW	\$500.00	\$400.00
H0032 - Treatment Plan Development by Non-Physician		\$155.00	\$124.00
H0032 - Treatment Plan Monitoring of speciality service	TS	\$150.00	\$120.00
H0034 - Medication Training and Support (member living independently), per 15 minutes		\$35.40	\$28.32
H0038 - Self Help/Peer Services		\$8.75	\$7.00
H0038 - Self Help/Peer Services	TT	\$2.50	\$2.00
H0039 - Assertive Community Treatment Face-To-Face		\$50.00	\$40.00
H0046 - Peer mentor services provided by a DD Peer Mentor		\$25.00	\$20.00
H0046 - Peer mentor services provided by a DD Peer Mentor	TT	\$10.00	\$8.00
H2000 - Behavioral Management Review		\$180.00	\$144.00
H2000 - Behavioral Management Review - Monitoring	TS	\$80.00	\$64.00
H2011 - Crisis Intervention Services		\$28.00	\$22.40
S5111 - Family Training		\$175.00	\$140.00
S9445 - Patient Education, NOC, Non-Physician, Individual		\$60.00	\$48.00
S9446 - Patient Education, NOC, Non-Physician, Group		\$40.50	\$32.40
S9470 - Nutritional counseling dietician visit		\$60.00	\$48.00
T1001 - Nursing or Nutritional Assessment		\$105.00	\$84.00
T1002 - RN services, 15 minutes		\$40.75	\$32.60
T1016 - Supports Coordination		\$95.00	\$76.00
T1017 - Targeted Case Management		\$56.00	\$44.80