

Specialized Therapeutic Services Fee Schedule

Description of Service	Procedure Code	Modifier 1	Modifier 2	Maximum Fee	Reimbursement and Service Limitations
Comprehensive Behavioral Health Assessment	H0031	HA		\$12.12 per quarter hour	<p>The comprehensive behavioral health assessment may be reimbursed only once per state fiscal year (July 1 through June 30) per recipient.</p> <p>Reimbursement is limited to a total of 20 hours per recipient per fiscal year.</p> <p>The assessment is reimbursed on the date that the report is completed.</p> <p>The date of referral may be used as the date of service if the recipient entered the Statewide Inpatient Psychiatric Program or if the recipient loses Medicaid eligibility prior to completion of the assessment.</p>
Specialized Therapeutic Foster Care, Level I	S5145			\$87.30 per day	<p>Medicaid will not reimburse a provider for days when a recipient is in a Juvenile Justice detention center.</p> <p>The community behavioral health services psychosocial rehabilitation and clubhouse will not be reimbursed as a separate service by Medicaid for recipients receiving specialized therapeutic foster care services.</p>
Specialized Therapeutic Foster Care, Level II	S5145	HE		\$135.80 per day	
Specialized Therapeutic Foster Care, Crisis Intervention	S5145	HK		\$135.80 per day	

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Therapeutic Group Care Services	H0019			\$180.00 per day	<p>Medicaid will not reimburse for therapeutic group care services when a recipient is in a Department of Juvenile Justice detention center placement.</p> <p>A provider may not be reimbursed for therapeutic group home services or any other community behavioral health service if the provider has been paid for the provision of the same service or type of service by another purchasing entity.</p>