



Standard Rate Schedule: Tailored Plan/Medicaid Direct Non-Clinician-Based

Revised 11/25/2024

Q - Requires LQASP (Licensed Qualified Autism Services Practitioner)

Service Description		Effective Date	Standard Rate
96138 - Psych or Neuropsych Testing Tech Tst Admin And Scoring		7/1/2024	\$ 37.99
96139 - Add-on Psych or Neuropsych Testing Tech Tst Admin And Scoring		7/1/2024	\$ 39.13
96146 - Psych or Neuropsych Automated Testing And Result		7/1/2024	\$ 2.57
97151 - Behavior identification assessment	Q	7/1/2024	\$ 30.56
97152 - Behavior identification supporting assessment, tech	Q	7/1/2024	\$ 61.73
97153 - Adaptive behavior treatment by protocol, tech	Q	7/1/2024	\$ 20.81
97154 - Group adaptive behavior treatment by protocol, tech	Q	7/1/2024	\$ 11.37
97155 - Adaptive behavior treatment with protocol modification, QHP	Q	7/1/2024	\$ 32.22
97156 - Family adaptive behavior treatment guidance	Q	7/1/2024	\$ 30.00
97157 - Multiple-family group adaptive behavior treatment guidance	Q	7/1/2024	\$ 11.51
H0010 - Detox Non-Hospital Med		10/1/2024	\$ 756.65
H0012HB - Community Residential Tx-Adult		7/1/2024	\$ 163.60
H0013 - SA Med Mon Community Residential Tx		7/1/2024	\$ 253.90
H0014 - Ambulatory Detox		10/1/2024	\$ 31.17
H0014HF - Ambulatory Detox w/ Extended On-Site Monitoring		10/1/2024	\$ 34.43
H0015 - SAIOP		8/1/2024	\$ 170.03
H0019HK - HRI L4, BH LT Res		7/1/2024	\$ 404.45
H0019HQ - HRI L3, <=4 beds, BH LT Res		7/1/2024	\$ 296.12
H0019TJ - HRI L3, 5+ beds, BH LT Res		7/1/2024	\$ 241.28
H0019UR - Residential Level IV (5+ Beds)		7/1/2024	\$ 401.45
H0020 - Outpatient Opioid Treatment (Weekly)		7/1/2024	\$ 254.93
H0032U5 - High Fidelity Wraparound Team		7/1/2024	\$ 2,943.67
H0032U5U1 - High Fidelity Wraparound Team encounter		7/1/2024	\$ 0.01
H0035 - MH PARTIAL HOSP, < 24 HR		7/1/2024	\$ 171.01
H0038 - Peer Support Services (PSS) - individual		7/1/2024	\$ 16.50
H0038HQ - Peer Support Services (PSS) - group		7/1/2024	\$ 3.74
H0038YW - Peer Support Services (PSS) - individual - Encounter		7/1/2024	\$ 0.01
H0040 - Assertive Community Treatment Team (ACTT)		7/1/2024	\$ 430.19
H004022 - Assertive Community Treatment Team (ACTT) > 4 events per month		7/1/2024	\$ 0.01
H0040U5 - Step Down Assertive Community Treatment Team (ACTT)		7/1/2024	\$ 486.00
H0040U5HA - Child Focused Assertive Community Treatment Team (ACTT)		7/1/2024	\$ 486.00
H0040U5HATS - Child Focused Assertive Community Treatment Team (ACTT), Encounter		7/1/2024	\$ 0.01
H0046 - High Risk Res L1		7/1/2024	\$ 86.25
H2011 - Crisis Services		7/1/2024	\$ 99.00
H2012HA - Day Treatment Child		7/1/2024	\$ 44.25
H2015HTHF - CST - SA Professional - Community Support Team		7/1/2024	\$ 38.00
H2015HTHM - CST - Paraprofessional - Community Support Team		7/1/2024	\$ 38.00
H2015HTHN - CST - QP/AP - Community Support Team		7/1/2024	\$ 38.00
H2015HTHO - CST - Team Lead - Community Support Team		7/1/2024	\$ 38.00
H2015HTU1 - CST - PSS - Community Support Team		7/1/2024	\$ 38.00
H2017 - Psychosocial Rehab		7/1/2024	\$ 3.69
H2020 - Child Residential Level II – Program Type		7/1/2024	\$ 160.61
H2021U5 - Outpatient Plus		7/1/2024	\$ 15.17
H2021U5HQ - Group Outpatient Plus		7/1/2024	\$ 7.49
H2022 - Intensive In-Home		7/1/2024	\$ 298.15
H2022HEU5 - In-Home Therapy Services		7/1/2024	\$ 539.46
H2022U5 - Transitional Youth Services		7/1/2024	\$ 2,694.45
H2033 - Muulti-Sytemic Therapy		7/1/2024	\$ 47.26



**Standard Rate Schedule:
Tailored Plan/Medicaid Direct
Non-Clinician-Based**

Revised 11/25/2024

Q - Requires LQASP (Licensed Qualified Autism Services Practitioner)

Service Description		Effective Date	Standard Rate
H2035 - SA Comprehensive Outpatient Trt Prog		8/1/2024	\$ 58.61
Q3014GT - Telehealth Originating Site Fee		7/1/2024	\$ 21.25
S5145 - CTSP Residential II		7/1/2024	\$ 175.00
S5145HA - CTSP Family Type Residential II IAFT		7/1/2024	\$ 272.11
S5145U5 - Enhanced Therapeutic Foster Care		7/1/2024	\$ 175.00
S5145YA - Enh Rate Therapeutic Foster Care		7/1/2024	\$ 175.00
S9484 - Facility Based Crisis		7/1/2024	\$ 33.00
S9484HA -Facility Based Crisis HR - Child & Adol		7/1/2024	\$ 37.32
T1017HT - Tailored Care Management		7/1/2024	\$ 343.97
T1019U4 - Individual Support		7/1/2024	\$ 16.75
T1019U4TS - Individual Support - non-EVV, only in the community		7/1/2024	\$ 16.75
T1023 - Diagnostic Assessment		7/1/2024	\$ 298.93
T2016U5 - Behavioral Health Crisis Risk Assessment and Intervention (BH-CAI)		7/1/2024	\$ 450.00
T2016U5U1 - L1 Long-term Community Supports		7/1/2024	\$ 136.00
T2016U5U2 - L2 Long-term Community Supports		7/1/2024	\$ 250.27
T2016U5U3 - L3 Long-term Community Supports		7/1/2024	\$ 276.24
T2016U5U4 - L4 Long-term Community Supports		7/1/2024	\$ 329.93
T2016U5U6 - L5 Long-term Community Supports		7/1/2024	\$ 302.94