

Procedure Codes Crosswalk Effective for Dates of Service Before/After Oct. 1, 2026

Procedure Codes Dates of Service Prior to 10/01/2026	Service Code	Modifiers	Partners Health Management Legacy Service Description	Procedure Codes Dates of Service On or After 10/1/2026
YP822SA	YP822	SA	YP822 SA - Inpt Adult Med Detox SRV Enthance 3 Way	YP822
YP821SA	YP821	SA	YP821 SA - INPT ADULT PSYCH/MED DETOX SRV	YP821
YP780TL	YP780	TL	YP780TL - Group Living High Therapeutic Leave	0183 - YP780 *
YP770TL	YP770	TL	YP770 TL - GROUP LIVING MODERATE THERAPEUTIC LEAVE	0183 - YP770*
YP760TL	YP760	TL	YP760 TL - Grp Living Low Therapeutic Leave	0183 - YP760*
YP642BG	YP642	BG	YP642BG- SE for IDD & TBI - Long Term Phase	YP642 BG
YP642BF	YP642	BF	YP642BF - SE for IDD & TBI - Employment Stabilization	YP642 BF
YP642BE	YP642	BE	YP642BDE- SE for IDD & TBI - Career Planning Assessment	YP642 BE
YP642BD	YP642	BD	YP642BD - SE for IDD/TBI - Pre-Employment Phase	YP642 BD
YP630DJ	YP630	DJ	YP630 DJ - Supported Employment Indv DOJ	YP630
YM848U2	YM848	U2	YM848 U2 - Residential Supports I/DD & TBI Level 3 AFL	YM848
YM847U2	YM847	U2	YM847 U2 - Residential Supports I/DD & TBI Level 2 AFL	YM847
YM846U2	YM846	U2	YM846 U2 - Residential Supports I/DD & TBI Level 1 AFL	YM846
YM645LT	YM645	LT	YM645LT - LONG TERM SUPPORT	YM645
YM645IS	YM645	IS	YM645IS - INTENSIVE LONG TERM SUPPORT	YM645
YM645DJ	YM645	DJ	YM645DJ Intensive Long Term Support DOJ	YM645
YA396S3	YA396	S3	YA396 S3 - OBOT Maintenance	YA396
YA396S2	YA396	S2	YA396 S2 - OBOT Stabilization	YA396
YA396S1	YA396	S1	YA396 S1 - OBOT Assessment and Induction	YA396
YA353BD	YA353	BD	YA353 BD - Post-Discharge Assertive Engagement; PSS/ PP- DAY 1-7 AFTER DISCHARGE	YA353
YA352BD	YA352	BD	YA352 BD - Post-Discharge Assertive Engagement; QP or LP - DAY 1-7 AFTER DISCHARGE	YA352
YA341TK	YA341	TK	YA341TK - ASSERTIVE ENGAGEMENT	YA341
T2041YI	T2041	YI	T2041 YI - Community Navigator Annual Information Session on Self Direction	T2041
T2033TFSA	T2033	TF SA	T2033 TF SA - Supported Living Level 3-Special Needs Adjustment	T2033
T2016U5U6TL	T2016	U5 U6 TL	T2016 U5 U6 TL - Group Living LTCS Level 5 Therapeutic Leave	0183 - T2016 U5 U6*
T2016U5U4TL	T2016	U5 U4 TL	T2016 U5 U4 TL - Supervised Living LTCS Level 4 Therapeutic Leave	0183 - T2016 U5 U4*
T2016U5U3TL	T2016	U5 U3 TL	T2016 U5 U3 TL - Companion Living LTCS Level 3 Therapeutic Leave	0183 - T2016 U5 U3*
H2033M5	H2033	M5	H2033 M5 - MULTI-SYSTEMIC THERAPY (MST) 5 MONTHS	H2033 HA
H2033M4PB	H2033	M4 PB	H2033 M4 PB - MST 4 Months Problem Behaviors	H2033 HA
H2033M4	H2033	M4	H2033 M4 - MULTI-SYSTEMIC THERAPY (MST) 4 MONTHS	H2033 HA
H2033M3	H2033	M3	H2033 M3 - MULTI-SYSTEMIC THERAPY (MST) 3 MONTHS	H2033 HA
H2033M2	H2033	M2	H2033 M2 - MULTI-SYSTEMIC THERAPY (MST) 2 MONTHS	H2033 HA
H2033M1	H2033	M1	H2033 M1 - MULTI-SYSTEMIC THERAPY (MST) 1 MONTH	H2033 HA
H2017DJ	H2017	DJ	H2017 DJ - Psychosocial Rehabilitation	H2017
H2015HTU1DJ	H2015	HT U1 DJ	H2015 HT U1 DJ - CST Peer Support Specialist DOJ	H2015 HT U1
H2015HTHODJ	H2015	HT HO DJ	H2015 HT HO DJ - CST Licensed Team Lead DOJ	H2015 HT HO
H2015HTHNDJ	H2015	HT HN DJ	H2015 HT HN DJ - CST Qualified Professional/Associate Professional DOJ	H2015 HT HN
H2015HTHMDJ	H2015	HT HM DJ	H2015 HT HM DJ - CST Paraprofessional DOJ	H2015 HT HM
H2015HTHFDJ	H2015	HT HF DJ	H2015 HT HF DJ - CST Substance Use Counselor DOJ	H2015 HT HF
H2015DJ	H2015	DJ	H2015 DJ - CST Department of Justice	H2015
H2014EN	H2014	EN	H2014 EN - Developmental Therapy Encounter	H2014
H2011U5TS	H2011	U5 TS	H2011 U5 TS - Enhanced Crisis Response (ECR) Child/Adolescent Encounter	H2011 U5
H0040OT	H0040	OT	H0040 OT - ASSERTIVE COMMUNITY TREATMENT TEAM	H0040
H0040HAU5EN	H0040	HA U5 EN	H0040 HA U5 EN - ACTT Youth Encounter	H0040 U5 HA TS
H0040ENDJ	H0040	EN DJ	H0040 EN DJ - ACTT Assertive Community Treatment Team	H0040 22
H0040EN	H0040	EN	H0040 EN - ACTT Assertive Community Treatment Team	H0040 22
H0040DJ	H0040	DJ	H0040 DJ - ACTT Assertive Comm Treatment Team	H0040
H0038HQDJ	H0038	HQ DJ	H0038 HQ DJ - Peer Support Group DOJ	H0038 HQ
H0038EN	H0038	EN	H0038 EN - Peer Support Encounter	H0038
H0038DJ	H0038	DJ	H0038 DJ - Peer Support Group DOJ	H0038
H0036U5EN	H0036	U5 EN	H0036 U5 EN - Outpatient Plus QP 15 Min	H0036 U5
H0019TJPB	H0019	TJ PB	H0019 TJ PB - Residential Program for Problem Sexual Behaviors	H0019 TJ
99442	99442		99442 Telephone Eval & Mgmt by a phys or QHP, estab pat	99442
99441	99441		99441 - Telephone E/M service; 5-10 minutes of medical discussion	99441
99407EP	99407	EP	99407:EP - Smoking and Tobacco Use Cessation counseling visit; intensive, greater than 10 minutes	99407
99395EP	99395	EP	99395:EP - estab. pt physical exam: 18 to 39 years	99395
99385EP	99385	EP	99385:EP - initial comprehensive preventive medicine age 018-039	99385
99384EP	99384	EP	99384:EP - new pt physical exam: 12 through 17 years	99384
99383EP	99383	EP	99383:EP - new pt physical exam: 5 through 11 years	99383

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99382EP	99382	EP	99382:EP - initial comprehensive preventive medicine age 001-004	99382
99381EP	99381	EP	99381:EP - initial comprehensive preventive medicine evaluation and management age 000-001	99381
99285CS	99285	CS	99285 CS - Respiratory panel 2.1 (RP2) TEST	99285
99283CS	99283	CS	99283 CS - ER visit, low severity	99283
99232GW	99232	GW	99232 GW - Subsequent Hospital 25 Min	99232
99215OT	99215	OT	99215 OT - E+M HIGH - ESTABLISHED PATIENT	99215
99214OU	99214	OU	99214 OU - ESTABLISHED PATIENT (MAT)	99214
99214OT	99214	OT	99214 OT - E+M MODERATE - ESTABLISHED PATIENT	99214
99214GW	99214	GW	99214 GW - E+M MODERATE - ESTABLISHED PATIENT	99214
99213OU	99213	OU	99213 OU - ESTABLISHED PATIENT (MAT)	99213
99213OT	99213	OT	99213 OT - E+M DETAILED - ESTABLISHED PATIENT	99213
99212OU	99212	OU	99212 OU - E+M EXPANDED - ESTABLISHED PATIENT (MAT)	99212
99205OU	99205	OU	99205 OU - E+M HIGH - NEW PATIENT	99205
99205OT	99205	OT	99205 OT - E+M HIGH - NEW PATIENT	99205
99204OU	99204	OU	99204 OU - NEW PATIENT (MD ONLY)	99204
99204OT	99204	OT	99204 OT - E+M NEW PATIENT (MD ONLY)	99204
99204IN	99204	IN	99204 IN - E+M NEW PATIENT (MD ONLY)	99204
99203OU	99203	OU	99203 OU - E+M DETAILED - NEW PATIENT	99203
99203OT	99203	OT	99203 OT - E+M DETAILED - NEW PATIENT	99203
97152NC	97152	NC	97152 NC - R/B BHT Assess Follow Up (Non-Clinical)	97152
97151NC	97151	NC	97151 NC - RB-BHT Comprehensive Assessment (Non-Clinical)	97151
90853AH	90853	AH	90853AH - Non Family Multi Group Therapy	90853
9085322	90853	22	90853 22 - Group Therapy SA Subscriber	90853
90847Z2	90847	Z2	90847 Z2 - PCIT Family Group w Child	90847 22
90847Z1	90847	Z1	90847 Z1 - FAMILY THERAPY WITH PATIENT	90847
90847SR	90847	SR	90847 SR - Family Therapy With Patient	90847
90847AJ	90847	AJ	90847 AJ - FAMILY THERAPY WITH PATIENT	90847
90846Z2	90846	Z2	90846 Z2 - PCIT Family Group w/o Child	90846 22
90846Z1	90846	Z1	90846 Z1 - FAMILY THERAPY WITHOUT PATIENT	90846
90846SR	90846	SR	90846 SR - Family Therapy Without Patient	90846
90846AJ	90846	AJ	90846 AJ - FAMILY THERAPY WITHOUT PATIENT	90846
90840EN	90840	EN	90840 EN - Psychotherapy Crisis Add-on Encounter	90840
90839EN	90839	EN	90839 EN - Psychotherapy Crisis Encounter	90839
90837Z1	90837	Z1	90837 Z1 - Psychotherapy Trauma Focused 60 Minutes	90837
90837XE	90837	XE	90837 XE - Psychotherapy 60 min	90837
90837SR	90837	SR	90837 SR - Psychotherapy 60 minutes	90837
90837SO	90837	SO	90837 SO - Sex Offender Therapy 53+	90837
90837EM	90837	EM	90837 EM - EMDR	90837
90837BT	90837	BT	90837 BT - Psychotherapy - 60 Minutes Brief	90837
90837AJ	90837	AJ	90837 AJ - Psychotherapy - 60 Minutes	90837
90834TU	90834	TU	90834 TU - TFU Psychotherapy - 45 Minutes	90834
90834OT	90834	OT	90834 OT - Psychotherapy - 45 Minutes	90834
90834IH	90834	IH	90834 IH - Home Based Psychotherapy, 45 Min	90834
90834BT	90834	BT	90834 BT - Psychotherapy - 45 Minutes Brief	90834
90834AH	90834	AH	90834 AH - Psychotherapy - 45 Minutes	90834
9083422	90834	22	90834 22 - Psychotherapy - 45 min SA Subscriber	90834
90832TU	90832	TU	90832 TU - TFU Psychotherapy - 30 Minutes	90832
90832IH	90832	IH	90832 IH - Home Based Psychotherapy, 30 Min	90832
90832GW	90832	GW	90832 GW - Psychotherapy - 30 Minutes	90832
90832BT	90832	BT	90832 BT - Psychotherapy - 30 Minutes Brief	90832
90832AJ	90832	AJ	90832 AJ - Psychotherapy - 30 Minutes	90832
90832AH	90832	AH	90832 AH - Psychotherapy - 30 Minutes	90832
9083222	90832	22	90832 22 - Psychotherapy 30 min SA Subscriber	90832
90791DJ	90791	DJ	90791DJ - Psychatric Diagnostic Evaluation	90791
90791TICU	90791	TI CU	90791 TI CU - Trauma Informed Comprehensive Clinical Assessment Yth & Fam Svs	90791 22
90791TI	90791	TI	90791 TI - Commprehensive Assessment Trauma Focused	90791 22
90791SO	90791	SO	90791 SO - Psychiatric Diag SA Subscriber	90791
90791OT	90791	OT	90791 OT - Psychiatric Diagnostic Evaluation (No Medical Services)	90791
90791IN	90791	IN	90791 IN - Psychiatric Diagnostic Evaluation (No Medical Services)	90791
90791IH	90791	IH	90791 IH - Home Based Psychiatric Diagnostic Evaluation (Non-Medical)	90791
90791BT	90791	BT	90791 BT - Psychiatric Diagnostic Evaluation (No Medical Services)	90791
9079122	90791	22	90791 22 - Psychiatric Diag SA Subscriber	90791

* Note: Therapeutic Leave is billed on form UB-04 with revenue code 0183 plus the HCPCS code related to associated leave.