

Licensed/Registered/Waivered SW/MFT/PCC		CDM#	CPT/HCPC	
Assessment	Psych Diagnostic Eval, 15 Min	90791-4	90791	
Assessment	Psych Eval of Hospital Record, 15 Min	90885-4	90885	
Assessment	Developmental Screening, 15 Minutes	96110-4	96110	
Assessment	Neurobehavioral Status Exam, First Hour	96116-4	96116	
Assessment	Neurobehavioral Status Exam, Each Additional Hour	96121-4	96121	Add-on
Assessment	Brief Emotional/Behavioral Assessment, 15 Min	96127-4	96127	
Assessment	Telephone Assmt and Mgmt Service, 5-10 Min	98966-4	98966	
Assessment	Telephone Assmt and Mgmt Service, 11-20 Min	98967-4	97967	
Assessment	Telephone Assmt and Mgmt Service, 21-30 Min	98968-4	98968	
Assessment	Mental Health Assessment by Non- Physician, 15 Minutes	70899-418	H0031	
Assessment	Comprehensive Multidisciplinary Eval, 15 Min	70899-417	H2000	
Assessment	NonBillable BH Mental Health Assessment Svcs	70899-407		
Case Mangement Services	Targeted Case Management, Each 15 Min	70899-412	T1017	
Case Mangement Services	Targeted Case Management (ICC), Each 15 Min (for CYS - w/HK modifier)	70899-412	T1017	
Case Mangement Services	NonBillable BH Case Management Svcs	70899-402		
Crisis Intervention	Mobile Crisis Intervention, per 15 Min	70899-413	H2011	
Crisis Intervention	Psychotherapy for Crisis, First 30-74 Min	90839-4	90839	
Crisis Intervention	Psychotherapy for Crisis, Each Additional 30 Min	90840-4	90840	Add-on
Crisis Intervention	NonBillable BH Crisis Svcs	70899-403		
Family Therapy	Family Psychotherapy [Conjoint Psychotherapy] , 50 Min	90847-4	90847	
Family Therapy	NonBillable BH Family Therapy	70899-404		
Group Therapy	Group Psychotherapy, 15 Min	90853-4	90853	
Group Therapy	Multiple-Family Group Psychotherapy, 15 Min	90849-4	90849	
Group Therapy	NonBillable BH Group Therapy	70899-405		
Individual Therapy	Psychotherapy, 30 Min	90832-4	90832	
Individual Therapy	Psychotherapy, 45 Min	90834-4	90834	
Individual Therapy	Psychotherapy, 60 Min	90837-4	90837	

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Individual Therapy	NonBillable BH Individual Therapy	70899-406		
Medication Services	Oral Medication Administration, Direct Observation, 15 Min	70899-414	H0033	
Medication Services	NonBillable Medication Services	70899-409		
Plan Development	Med Team Conf by Non-MD, with Pt/Fam Present, 30 Min+	99366-4	99366	
Plan Development	Med Team Conf by Non-MD, Pt/Fam not Present, 30 Min+	99368-4	99368	
Plan Development	Care Management Services for Behavioral Health Condition, directed by Physician. At least 20 Minutes	99484-4	99484	
Plan Development	MHS Plan Developed by Non-Phys, 15 Minutes	70899-422	H0032	
Plan Development	NonBillable Plan Development	70899-410		
Rehabilitation	Psychosocial Rehabilitation (Individual), per 15 mins	70899-423	H2017	
Rehabilitation	Psychosocial Rehabilitation (Fam - put "Collateral Contact" and identify who contact is in body of progress note), per 15 mins	70899-423	H2017	
Rehabilitation	Psychosocial Rehabilitation (Grp - use HQ modifier), per 15 mins	70899-429	H2017	
Rehabilitation	Psychosocial Rehabilitation - IHBS (for CYS, use HK modifier), per 15 mins	70899-423	H2017	
Rehabilitation	Community-Based Wrap-Around Services, per 15 mins	70899-424	H2021	
Rehabilitation	NonBillable Rehab Svcs	70899-425		
Supplemental Service	Interactive Complexity - (Use w/Assmt, Ind, Grp,	90785-4	90785	Supplemental
Supplemental Service	Sign Lang. or Oral Interp. Svs, 15 Min (Use w/Assess, Ind, Fam, Grp, Crisis, TCM/ICC, Rehab/IHBS, Plan Dev)	70899-411	T1013	Supplemental
Supplemental Service	Interp. of Psych Results to Fam/Others, 15 Min - (used w/Assess, Ind, Fam or Crisis as primary)	90887-4	90887	Supplemental