

Nebraska Medicaid BH Fee Schedule Changes Effective July 1, 2008

Service	Procedure Code	Modifier	Provider Type	Managed Care - Old	Fee For Service - Old	Managed Care - New	Fee For Service - New
Ther/Proph/Diag Injection, Sc/Im *	90772	~	01,02,29,22	\$9.18	\$9.18	\$9.45	\$9.49
Initial Diagnostic Interview	90801	~,GT	01,02	\$118.73	\$155.74	\$126.92	\$126.53
Initial Diagnostic Interview	90801	~,GT	29,22	\$106.85	\$155.74	\$119.15	\$118.52
Initial Diagnostic Interview	90801	~,GT	57	\$85.47	\$79.43	\$87.52	\$88.09
Initial Diagnostic Interview	90801	~,GT	67	\$94.96	\$105.90	\$98.54	\$99.30
Individual Psychotherapy	90804	~	01,02	\$55.21	\$46.72	\$56.13	\$56.22
Individual Psychotherapy	90804	~	29,22	\$33.02	\$46.72	\$34.81	\$34.59
Individual Psychotherapy	90804	~	36,37,38,30	\$33.02	\$35.04	\$34.29	\$34.11
Individual Psychotherapy	90804	~	57,64	\$44.40	\$35.04	\$45.69	\$45.65
Individual Psychotherapy	90804	~	67	\$44.40	\$46.72	\$46.36	\$46.13
Individual Psychotherapy	90804	~	78	\$33.02	\$32.24	\$33.96	\$34.11
Individual Psychotherapy with Medical Mgmt	90805	~,GT	01,02	\$55.21	\$58.10	\$57.10	\$57.36
Individual Psychotherapy with Medical Mgmt	90805	~,GT	29,22	\$33.02	\$58.10	\$40.28	\$40.03
Individual Psychotherapy	90806	~	01,02	\$101.99	\$93.73	\$104.58	\$104.10
Individual Psychotherapy	90806	~	29,22	\$60.40	\$93.73	\$81.16	\$80.97
Individual Psychotherapy	90806	~	57,64	\$81.20	\$70.30	\$82.43	\$82.89
Individual Psychotherapy	90806	~	36,37,38,30	\$60.40	\$70.30	\$63.09	\$62.65
Individual Psychotherapy	90806	~	67	\$81.20	\$93.73	\$85.37	\$85.79
Individual Psychotherapy	90806	~	78	\$60.40	\$64.67	\$62.37	\$62.65
Individual Psychotherapy	90806	HF	01,02	\$104.53		\$104.58	
Individual Psychotherapy	90806	HF	29,22	\$61.78		\$81.16	
Individual Psychotherapy	90806	HF	57,64	\$83.06		\$82.43	
Individual Psychotherapy	90806	HF	36,37,38,30	\$61.78		\$63.09	
Individual Psychotherapy	90806	HF	67	\$83.06		\$85.37	
Individual Psychotherapy	90806	HF	78	\$61.78		\$62.37	
Individual Psychotherapy with Medical Mgmt	90807	~	01,02	\$101.99	\$121.01	\$107.11	\$107.02
Individual Psychotherapy with Medical Mgmt	90807	~	29,22	\$60.40	\$121.01	\$70.17	\$69.69
Individual Psychotherapy	90808	~	01,02	\$101.99	\$121.40	\$104.95	\$104.87
Individual Psychotherapy	90808	~	29,22	\$62.94	\$121.40	\$64.77	\$64.92
Individual Psychotherapy	90808	~	36,37,38,30	\$62.94	\$91.05	\$68.99	\$68.67
Individual Psychotherapy	90808	~	57,64	\$83.75	\$91.05	\$86.37	\$86.15
Individual Psychotherapy	90808	~	67	\$83.75	\$121.40	\$94.97	\$94.89
Individual Psychotherapy	90808	~	78	\$62.94	\$83.77	\$64.77	\$64.92
Individual Psychotherapy with Medical Mgmt	90809	~	01,02	\$101.99	\$151.55	\$108.35	\$109.09
Individual Psychotherapy with Medical Mgmt	90809	~	29,22	\$62.94	\$151.55	\$95.16	\$95.07
Individual Psychotherapy with Medical Mgmt	90817	~	01,02	\$55.21	\$58.10	\$57.20	\$57.36
Individual Psychotherapy with Medical Mgmt	90817	~	29,22	\$0.00	\$0.00	\$45.48	\$45.41
Individual Psychotherapy with Medical Mgmt	90819	~	01,02	\$101.99	\$121.01	\$108.62	\$108.27
Individual Psychotherapy with Medical Mgmt	90819	~	29,22	\$0.00	\$0.00	\$98.39	\$98.31
Individual Psychotherapy with Medical Mgmt	90822	~	01,02	\$101.99	\$151.55	\$130.45	\$130.91
Individual Psychotherapy with Medical Mgmt	90822	~	29,22	\$0.00	\$0.00	\$120.80	\$121.56
Family Psychotherapy w/o client	90846	~	01,02	\$109.47	\$160.29	\$112.64	\$112.09
Family Psychotherapy w/o client	90846	~	29,22	\$78.76	\$160.29	\$81.04	\$80.77
Family Psychotherapy w/o client	90846	~	36,37,38,30	\$78.76	\$97.78	\$81.04	\$80.77
Family Psychotherapy w/o client	90846	~	57,64	\$87.56	\$97.78	\$90.10	\$90.66
Family Psychotherapy w/o client	90846	~	67	\$87.56	\$128.23	\$90.10	\$90.66
Family Psychotherapy w/o client	90846	~	78	\$78.76	\$88.16	\$81.04	\$80.77
Family Psychotherapy w/o client	90846	HF	01,02	\$109.47		\$112.64	
Family Psychotherapy w/o client	90846	HF	29,22	\$78.76		\$81.04	
Family Psychotherapy w/o client	90846	HF	36,37,38,30	\$78.76		\$81.04	
Family Psychotherapy w/o client	90846	HF	57,64	\$87.56		\$90.10	

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Family Psychotherapy w/o client	90846	HF	67	\$87.56		\$90.10	
Family Psychotherapy w/o client	90846	HF	78	\$78.76		\$81.04	
Family Psychotherapy w/client	90847	~	01,02	\$109.47	\$160.29	\$116.72	\$117.04
Family Psychotherapy w/client	90847	~	29,22	\$78.76	\$160.29	\$94.15	\$93.96
Family Psychotherapy w/client	90847	~	57,64	\$87.56	\$97.78	\$85.20	\$85.72
Family Psychotherapy w/client	90847	~	36,37,38,30	\$78.76	\$97.78	\$81.79	\$82.42
Family Psychotherapy w/client	90847	~	67	\$87.56	\$128.23	\$91.98	\$92.31
Family Psychotherapy w/client	90847	~	78	\$78.76	\$88.16	\$81.19	\$80.77
Family Psychotherapy w/client	90847	HF	01,02	\$109.47		\$116.72	
Family Psychotherapy w/client	90847	HF	29,22	\$78.76		\$89.01	
Family Psychotherapy w/client	90847	HF	57,64	\$87.56		\$90.34	
Family Psychotherapy w/client	90847	HF	36,37,38,30	\$78.76		\$81.79	
Family Psychotherapy w/client	90847	HF	67	\$87.56		\$91.98	
Family Psychotherapy w/client	90847	HF	78	\$78.76		\$81.19	
Group Psychotherapy	90853	~	01,02	\$38.33	\$28.75	\$39.44	\$39.33
Group Psychotherapy	90853	~	29,22	\$23.20	\$28.75	\$29.58	\$29.57
Group Psychotherapy	90853	~	36,37,38,30	\$23.20	\$17.54	\$23.62	\$23.65
Group Psychotherapy	90853	~	57	\$30.92	\$17.54	\$30.95	\$31.05
Group Psychotherapy	90853	~	64	\$30.92	\$17.54	\$30.95	\$31.05
Group Psychotherapy	90853	~	67	\$30.92	\$23.00	\$31.82	\$31.93
Group Psychotherapy	90853	~	78	\$23.20	\$15.81	\$23.63	\$23.65
Pharmacological Management	90862	~,GT	01,02	\$40.29	\$38.94	\$41.31	\$41.24
Pharmacological Management	90862	~,GT	29,22	\$34.24	\$38.94	\$36.19	\$36.04
Pharmacological Management	90862	~,GT	30	\$99.98		\$0.00	
ECT (single seizure)	90870	~	01,02	\$51.85	\$57.58	\$54.17	\$53.88
ECT (single seizure)	90870	~	10	\$114.22	\$57.58	\$106.81	\$106.59
Case Conference	90887	~	01,02	\$26.17	\$38.94	\$26.93	\$26.83
Case Conference	90887	~	29,22	\$15.65	\$38.94	\$16.10	\$16.02
Case Conference	90887	~	36,37,38,30	\$15.65	\$23.36	\$16.48	\$16.42
Case Conference	90887	~	57,64	\$15.65	\$23.36	\$16.60	\$16.42
Case Conference	90887	~	67	\$21.06	\$27.64	\$22.07	\$22.02
Case Conference	90887	~	78	\$15.65	\$21.41	\$16.10	\$16.02
Psychological Testing 1 hr	96101	~	67,57,64	\$84.18	\$93.44	\$87.08	\$87.45
Psychological Testing 1/2 hr	96101	52	67,57,64	\$42.08	\$46.72	\$43.45	\$43.24
Provider Mileage Per Mile	99082	~	01,02,29,22,67,57,36,37,38,30,78	\$0.41	\$1.00	\$0.44	\$0.44
Established Patient Evaluation	99211	~	01,02	\$29.30	\$29.28	\$30.14	\$30.22
Established Patient Evaluation	99211	~	29,22	\$24.90	\$29.28	\$26.85	\$26.82
Established Patient, Focused	99212	~	01,02	\$44.14	\$44.17	\$45.43	\$45.40
Established Patient, Focused	99212	~	29,22	\$37.53	\$44.17	\$0.00	\$0.00
Established Patient, Expanded	99213	~	01,02	\$58.60	\$58.51	\$60.29	\$60.26
Established Patient, Expanded	99213	~	29,22	\$49.81	\$58.51	\$0.00	\$0.00
Established Patient Evaluation	99214	~	01,02	\$80.48	\$80.02	\$82.76	\$82.68
Established Patient Evaluation	99214	~	29,22	\$68.40	\$80.02	\$0.00	\$0.00
Established Patient Evaluation	99215	~	01,02	\$80.48	\$106.26	\$84.17	\$84.17
Established Patient Evaluation	99215	~	29,22	\$68.40	\$106.26	\$0.00	\$0.00
Initial, Low	99221	~	01,02	\$44.72	\$45.88	\$46.20	\$46.04
Initial, Low	99221	~	29,22	\$38.02	\$45.88	\$0.00	\$0.00
Initial, Moderate	99222	~	01,02	\$67.05	\$80.74	\$71.09	\$71.20
Initial, Moderate	99222	~	29,22	\$57.01	\$80.74	\$0.00	\$0.00
Initial, High	99223	~	01,02	\$83.14	\$104.60	\$87.29	\$86.94
Initial, High	99223	~	29,22	\$70.69	\$104.60	\$0.00	\$0.00
Subsequent, Low	99231	~	01,02	\$27.67	\$27.53	\$28.44	\$28.46

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Subsequent, Low	99231	~	29,22	\$23.50	\$27.53	\$0.00	\$0.00
Subsequent, Moderate	99232	~	01,02	\$41.39	\$41.40	\$42.59	\$42.41
Subsequent, Moderate	99232	~	29,22	\$35.18	\$41.40	\$0.00	\$0.00
Subsequent, High	99233	~	01,02	\$49.18	\$73.40	\$50.61	\$50.59
Subsequent, High	99233	~	29,22	\$41.80	\$73.40	\$0.00	\$0.00
Outpatient Consultation, Focused	99241	~	01,02	\$43.32	\$44.04	\$44.60	\$44.64
Outpatient Consultation, Expanded	99242	~	01,02	\$50.23	\$62.39	\$51.69	\$51.86
Outpatient Consultation, Detailed	99243	~	01,02	\$81.88	\$80.74	\$84.14	\$84.30
Outpatient Consultation, Comprehensive	99244	~	01,02	\$90.23	\$102.76	\$92.85	\$92.70
Outpatient Consultation, Comprehensive	99245	~	01,02	\$90.23	\$139.46	\$92.85	\$93.30
Hospital Consultation	99251	~	01,02	\$42.91	\$47.71	\$47.33	\$47.39
Hospital Consultation	99252	~	01,02	\$49.76	\$66.06	\$59.22	\$58.92
Hospital Consultation	99253	~	01,02	\$81.12	\$84.41	\$84.90	\$84.70
Initial Consultation	99254	~	01,02	\$90.33	\$110.10	\$99.99	\$100.44
Initial Consultation	99255	~	01,02	\$90.33	\$146.80	\$113.16	\$113.09
Opps/Php; Train & Educ Serv - family educ CTA *	G0177	52	35	\$25.30		\$26.03	
Opps/Php; Train & Educ Serv - family educ CTA < bachelors ***	G0177	HM	34		\$25.68	\$26.42	\$26.41
Opps/Php; Train & Educ Serv - family educ CTA	G0177	HN	35	\$36.03	\$33.51	\$36.77	\$36.88
Substance Abuse Assessment **	H0001	~	01,02,67,64,57	\$211.93		\$218.08	
Substance Abuse Assessment **	H0001	~	22,29,36,37,38,78	\$176.62		\$181.74	
Substance Abuse Assessment Addendum **	H0001	52	01,02,29,22,67,64,36,37,38,64,78	\$41.92		\$43.14	
Pre-Treatment Assessment	H0002	~,GT	01,02,67,57,64	\$207.21	\$191.68	\$218.08	\$218.80
Pre-Treatment Assessment	H0002	~,GT	64,29,22,36,37,38,30,39	\$172.68	\$191.68	\$181.74	\$181.35
Addendum to Pre-Treatment Assessment	H0002	52	01,02,29,22,67,64,57,36,37,38,30,39	\$41.53	\$46.12	\$43.14	\$43.16
Outpatient Group Therapy **	H0005	~	01,02	\$39.20		\$40.34	
Outpatient Group Therapy **	H0005	~	22,29,36,37,38,78,58	\$23.73		\$24.42	
Outpatient Group Therapy **	H0005	~	67,57,64	\$31.62		\$32.54	
Medically Monitored Inpatient Detoxification **	H0010	~	47	\$269.46		\$277.27	
Clinically Managed Residential Social Detoxification **	H0012	~	47	\$161.67		\$166.36	
Ambulatory Detoxification with Extended On-Site Monitoring **	H0014	~	47	\$114.25		\$117.56	
Intensive Outpatient - Dual Diagnosis Capable **	H0015	~	47	\$25.62		\$26.36	
Hospital Based Residential Treatment Center	H0017	TG	10	\$295.07	\$295.28	\$305.38	\$306.70
Clinically Managed High Intensity Residential Treatment - Short Term Residential Dual Diagnosis Capable **	H0018	HF	47	\$174.66		\$179.73	
Clinically Managed High Intensity Residential Treatment - Residential Treatment Dual Diagnosis Capable **	H0018	HH	47	\$199.29		\$205.07	
Enhanced Treatment Group Home *	H0018	TF	81	\$205.50		\$211.46	
Community Based Residential Treatment Center	H0018	TG	82	\$237.90	\$235.98	\$244.80	\$242.68
Treatment Group Home	H0018	U1	81	\$162.11	\$159.29	\$166.76	\$167.09
Clinically Managed Medium Intensity Residential Treatment - Intermediate Residential Dual Diagnosis Capable **	H0019	~	47	\$143.67		\$147.84	
Clinically Managed Medium Intensity Residential Treatment - Therapeutic Community Dual Diagnosis Capable **	H0019	TT	47	\$129.25		\$133.00	
Outpatient Consultation, Comprehensive ****	H0031	AH	67	\$77.57	\$77.57	\$79.82	\$79.77
Partial Hospitalization - Partial Care Dual Diagnosis Capable **	H0035	~	47	\$68.36		\$70.34	
MRO Assertive Community Treatment day ****	H0040	~	41	\$41.92	\$41.92	\$43.14	\$43.11

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Family Assessment	H1011	~	01,02,29,22,67,57,36,37,38,30,64,39	\$66.20	\$72.48	\$68.34	\$68.57
Comp Multidisipln Eval - MDT Eval *	H2000	~	12,13	\$890.13		\$915.94	
Comp Multidisipln Eval - MDT Eval (methadone) **	H2000	HF	47	\$862.27		\$887.28	
Comp Multidisipln Eval - MDT Eval on family*	H2000	HK	12,13	\$890.13		\$915.94	
Comp Multidisipln Eval - MDT Eval (overnight) *	H2000	U1	13	\$155.07		\$159.57	
Partial Hospitalization (3-6 hrs/half day)	H2012	52	10	\$39.66		\$41.05	
Day Treatment Community Based (6 hours)	H2012	~	77		\$30.12		\$40.88
Day Treatment Community-Based (minimum of 3 hrs)	H2012	52	77	\$39.66	\$30.12	\$40.81	\$40.88
Day Treatment Community-Based (hourly 6+ hrs, max 6 hrs) ***	H2012	TU	77			\$40.81	\$40.88
MRO Community Support - MH month ****	H2016	HE	44	\$265.47	\$265.47	\$273.17	\$273.00
Outpatient Community Support - Adult Subst Abuse **	H2016	HF	47	\$217.75		\$224.06	
MRO Day Rehab 1/2 day (must bill 3 hr in 15 m increments) ****	H2017	~	45	\$2.14	\$2.14	\$2.20	\$2.20
MRO Day Rehab full day (day program/not overnight) ****	H2018	~	45	\$51.23	\$51.23	\$52.72	\$52.68
MRO Residential Rehab day (24 hr/overnight) ****	H2018	TG	46	\$104.79	\$104.79	\$107.83	\$107.76
Clinically Managed Low Intensity Residential Treatment - Halfway House Dual Diagnosis Capable **	H2034	~	47	\$59.39		\$61.11	
Haloperidol Injection - Haldol 5 mg *	J1630	~	01,02,29,22	\$10.66		\$10.97	
Haloperidol Decanoate Inj - Haldol 50 mg *	J1631	~	01,02,29,22	\$44.98	\$44.98	\$46.28	\$46.33
Fluphenazine Decanoate 25 mg - Prolixin *	J2680	~	01,02,29,22	\$14.24	\$14.24	\$14.65	\$14.67
Risperidone	J2794	~	12,13	invoice		invoice	
Olanzapine 2.5 mg	S0166	~	12,13	\$5.45		\$5.45	
Treatment Foster Care	S5145	~	80	\$102.07	\$100.29	\$105.01	\$105.20
Intensive Outpatient Psych (minimum of 3 hrs) *	S9480	~	12,13	\$95.16		\$97.92	
Crisis Intervention Mental H - Adult RTC TC1*	S9485	~	10,79	\$327.12		\$336.61	
Crisis Intervention Mental H - Community-Based RTC *	S9485	~	82	\$289.81		\$298.21	
Interpreter (verbal) *	T1013	~	01,02,12,13,22,29,47,67,64,57,78,34,35,36,37,38,39,58	\$6.59		\$6.78	
Interpreter (sign) *	T1013	SC	01,02,12,13,22,29,47,67,64,57,78,34,35,36,37,38,39,58	\$9.22		\$9.49	

Provider Types	Codes
Physician	01, 02
Licensed Psychologist/PhD	67
Specially Licensed Psychologist	64
Provisionally Licensed Psychologist	57
Mental Health Personal Care Aide	34
Mental Health Home Health Care Provider	35
Licensed Mental Health Practitioner, PLMHP, QMHP	36, 37, 38
Licensed Independent Mental Health Practitioner (eff 12-1-08)	39
Licensed Alcohol and Drug Abuse Counselor	78
PA	22
APRN	29
RN	30

Facility Types	Codes
Hospital	10
Hospital-Based Clinic	12
Professional Clinic	13
Day Rehab	45
Residential Rehab	46
Substance Abuse Treatment Center	47
Day Treatment Provider (minimum of 3 hrs)	77
Treatment Crisis Intervention	79
Treatment Foster Care	80
Treatment Group Home	81
Residential Treatment Center	82