

Prices of Common Services

Billable Service	Combined Code + Modifiers	Rate
Behavioral Health Screen	T1023	139.45
Mental Health Intake Assessment	H0031	521.12
Case Management	T1016	33.65
Psychotherapy, Individual 30 mins	90832	77.80
Psychotherapy, Individual 45 mins	90834	116.72
Psychotherapy, Individual 60 mins	90837	155.62
Behavioral Health Screen (Telehealth)	T1023-GT	139.45
Mental Health Intake Assessment (Telehealth)	H0031-GT	521.12
Case Management (Telehealth)	T1016-GT	33.65
Psychotherapy, Individual 30 mins (Telehealth)	90832 GT	77.80
Psychotherapy, Individual 45 mins (Telehealth)	90834 GT	116.72
Psychotherapy, Individual 60 mins (Telehealth)	90837 GT	155.62
Psychotherapy, Family w/o patient present 30 mins	90846-U7	79.41
Psychotherapy, Family w/o patient present 30 mins (Telehealth)	90846-U7 GT	79.41
Psychotherapy, Family w/o patient present 60 mins	90846	163.70
Psychotherapy, Family w/o patient present 60 mins (Telehealth)	90846 GT	163.70
Psychotherapy, Family with patient present 30 mins	90847-U7	79.41
Psychotherapy, Family with patient present 30 mins (Telehealth)	90847-U7 GT	79.41
Psychotherapy, Family with patient present 60 mins	90847	159.02
Psychotherapy, Family with patient present 60 mins (Telehealth)	90847 GT	159.02
Psychotherapy, Multi-family group 30 mins	90849-U7	31.80
Psychotherapy, Multi-family group 30 mins (Telehealth)	90849-U7 GT	31.80
Psychotherapy, Multi-family group 60 mins	90849	63.62
Psychotherapy, Multi-family group 60 mins (Telehealth)	90849-GT	63.62
Psychotherapy, Group 30 mins	90853-U7	31.11
Psychotherapy, Group 30 mins (Telehealth)	90853-U7 GT	31.11
Psychotherapy, Group 60 mins	90853	62.25
Psychotherapy, Group 60 mins (Telehealth)	90853-GT	62.25
Peer Support Services - Individual	H0038	31.65
Peer Support Services - Family (with patientpresent)	H0038-HR	31.65
Peer Support Services - Family (w/o patientpresent)	H0038-HS	31.65
Home based Family Treatment Level 1	H1011 V2	26.39
Peer-Based Crisis Services	H0038 V2	22.34
Intensive Case Management	H0023 V2	30.65
Intensive Case Management (Telehealth)	H0023 V2 GT	30.65
Treatment Plan Development/Review	T1007 V2	147.89
Treatment Plan Development/Review (Telehealth)	T1007 V2 GT	147.89

Peer Support Services - Family (w/o patientpresent) (Telehealth)	H0038-HS-GT	31.65
Peer Support Services - Family (with patientpresent) (Telehealth)	H0038-HR-GT	31.65
Peer Support Services - Individual (Telehealth)	H0038-GT	31.65
Integrated Mental Health & Substance Use Intake Assessment	H0031-HH	599.28
Integrated Mental Health & Substance Use Intake Assessment (Telehealth)	H0031-HH-GT	599.28
Home based Family Treatment Level 1 (Telehealth)	H1011-V2 GT	26.39