## Specialized Therapeutic Services Fee Schedule 2019

Description of Service	Procedure Code	Modifier 1	Modifier 2	Maximum Fee	Reimbursement and Service Limitations
Comprehensive Behavioral Health Assessment	H0031	HA		\$12.12 per quarter hour	The comprehensive behavioral health assessment may be reimbursed only once per state fiscal year (July 1 through June 30) per recipient.  Reimbursement is limited to a total of 20 hours per recipient per fiscal year. The assessment is reimbursed on the date that the report is completed.  The date of referral may be used as the date of service if the recipient entered the Statewide Inpatient Psychiatric Program or if the recipient loses Medicaid
					eligibility prior to completion of the assessment.
Specialized Therapeutic Foster Care, Level I	S5145			\$87.30 per day	Medicaid will not reimburse a provider for days when a recipient is in a Juvenile Justice detention center.
Specialized Therapeutic Foster Care, Level II	S5145	HE		\$135.80 per day	The community behavioral health services psychosocial rehabilitation and clubhouse will not be reimbursed as a separate service by Medicaid for recipients receiving specialized therapeutic foster care services.
Specialized Therapeutic Foster Care, Crisis Intervention	S5145	НК		\$135.80 per day	

Therapeutic	H0019		\$180.00	Medicaid will not reimburse
Group Care			per day	for therapeutic group care
Services				services when a recipient is
				in a Department of Juvenile
				Justice detention center
				placement.
				A provider may not be
				reimbursed for therapeutic
				group home services or any
				other community behavioral health service if the provider
				has been paid for the
				provision of the same service
				or type of service by another
				1
				purchasing entity.