

Meridian Behavioral Healthcare Schedule of Fees - FY2019-2020							FINANCIAL CLASS < 300% of Poverty							FINANCIAL CLASS > 300% of Poverty						
							Income Range	0-150%	>150-175%	>175-200%	>200-225%	>225-250%	>250-275%	>275-300%	>300-325%	>325-350%	>350-375%	>375-400%	400+%	
Board Approved 9/2017							Client Disc	100.00%	96.00%	94.00%	89.00%	81.00%	70.00%	56.00%	39.00%	19.00%	10.00%	5.00%	0.00%	
DESCRIPTIONS	HCPC	Modifiers	CPT	Modifiers	Full Fee	UNIT	Client Resp	COPAY	4.00%	6.00%	11.00%	19.00%	30.00%	44.00%	61.00%	81.00%	90.00%	95.00%	100.00%	
Facility Services																				
Bed Day Substance Abuse Residential (Bridge House/Recovery/MIST) - exclusive of professional services	1002				\$ 500	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Bed Day Substance Abuse Residential (Bridge House/Recovery/MIST) - inclusive of professional services	1002				\$ 510	Per Day		\$2.00	\$20.40	\$30.60	\$56.10	\$96.90	\$153.00	\$224.40	\$311.10	\$413.10	\$459.00	\$484.50	\$510.00	
Bed Day CSU (Inclusive of Physicians Services)	124				\$ 1,200	Per Day		\$2.00	\$48.00	\$72.00	\$132.00	\$228.00	\$360.00	\$528.00	\$732.00	\$972.00	\$1,080.00	\$1,140.00	\$1,200.00	
Bed Day CSU (Exclusive of Physicians Services)	124				\$ 850	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Bed Day Detox - exclusive of professional services	126				\$ 800	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Bed Day Detox - inclusive of professional services	126				\$ 800	Per Day		\$2.00	\$32.00	\$48.00	\$88.00	\$152.00	\$240.00	\$352.00	\$488.00	\$648.00	\$720.00	\$760.00	\$800.00	
Partial Hospital Program - MH	0912				\$ 300	Per Day		\$2.00	\$12.00	\$18.00	\$33.00	\$57.00	\$90.00	\$132.00	\$183.00	\$243.00	\$270.00	\$285.00	\$300.00	
Partial Hospital Program - SA	0913				\$ 300	Per Day		\$2.00	\$12.00	\$18.00	\$33.00	\$57.00	\$90.00	\$132.00	\$183.00	\$243.00	\$270.00	\$285.00	\$300.00	
Intensive Outpatient Program - MH	905				\$ 250	Per Day		\$2.00	\$10.00	\$15.00	\$27.50	\$47.50	\$75.00	\$110.00	\$152.50	\$202.50	\$225.00	\$237.50	\$250.00	
Intensive Outpatient Program - SA	906				\$ 250	Per Day		\$2.00	\$10.00	\$15.00	\$27.50	\$47.50	\$75.00	\$110.00	\$152.50	\$202.50	\$225.00	\$237.50	\$250.00	
Ropes Course Charge (per group of 10)	H0004				\$ 600	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Ropes Course Charge (per group of 10) - Non-Profit Groups	H0004				\$ 400	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Adult Group Home Services					\$ 250	Per Day		\$2.00	\$10.00	\$15.00	\$27.50	\$47.50	\$75.00	\$110.00	\$152.50	\$202.50	\$225.00	\$237.50	\$250.00	
Professional Services - Inpatient																				
CSU Initial Evaluation - MD - low complexity			99221		\$ 175	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Initial Evaluation - MD - medium complexity			99222		\$ 185	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Initial Evaluation - MD - high complexity			99223		\$ 195	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Subsequent Care - 15 minutes			99231		\$ 80	15 minute		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Subsequent Care - 25 minutes			99232		\$ 90	25 minute		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Subsequent Care - 35 minutes			99233		\$ 115	35 minutes		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Inpatient H&P - initial 5-11 yrs			99383		\$ 120	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Inpatient H&P - initial 12-17 yrs			99384		\$ 121	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Inpatient H&P - initial 18-39 yrs			99385		\$ 122	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Inpatient H&P - initial 40-64 yrs			99386		\$ 123	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Consultation Evaluation (Baker Act)			99233		\$ 100	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Court Testimony (Baker Act)			99251		\$ 150	Per hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
CSU Discharge Evaluation - MD			99238		\$ 115	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Professional Services Outpatient																				
Evaluation-MD	H2000	HP/GT	90792		\$ 425	Per Event		\$3.00	\$17.00	\$25.50	\$46.75	\$80.75	\$127.50	\$187.00	\$259.25	\$344.25	\$382.50	\$403.75	\$425.00	
Evaluation-ARNP	H2000	HO/GT	90792		\$ 370	Per Event		\$3.00	\$14.80	\$22.20	\$40.70	\$70.30	\$111.00	\$162.80	\$225.70	\$299.70	\$333.00	\$351.50	\$370.00	
Specialty Evaluation - ARNP (exclusive of report writing)					\$ 370	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Specialty Evaluation - MD (exclusive of report writing)					\$ 425	Per Event		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Bio-Psychosocial (Intake) Evaluation			90791		\$ 175	Per Event		\$3.00	\$7.00	\$10.50	\$19.25	\$33.25	\$52.50	\$77.00	\$106.75	\$141.75	\$157.50	\$166.25	\$175.00	
Mental Health	H0031	HN/GT			\$ 175	Per Event		\$3.00	\$7.00	\$10.50	\$19.25	\$33.25	\$52.50	\$77.00	\$106.75	\$141.75	\$157.50	\$166.25	\$175.00	
Substance Abuse	H0001	HN/GT			\$ 175	Per Event		\$3.00	\$7.00	\$10.50	\$19.25	\$33.25	\$52.50	\$77.00	\$106.75	\$141.75	\$157.50	\$166.25	\$175.00	
Comprehensive Assessment (Child Welfare Referral Only)	H0031	HA			\$ 150	Per Hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
In-Depth Assessment - Mental Health - New Patient	H0031	HO/GT			\$ 200	Per Eval		\$3.00	\$8.00	\$12.00	\$22.00	\$38.00	\$60.00	\$88.00	\$122.00	\$162.00	\$180.00	\$190.00	\$200.00	
In-Depth Assessment - Mental Health - Established Patient	H0031	TS/GT			\$ 150	Per Eval		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00	
In-Depth Assessment - New Patient - Substance Abuse	H0001	HO/GT			\$ 200	Per Eval		\$3.00	\$8.00	\$12.00	\$22.00	\$38.00	\$60.00	\$88.00	\$122.00	\$162.00	\$180.00	\$190.00	\$200.00	
In-Depth Assessment - Established Patient S/A	H0001	TS/GT			\$ 150	Per Eval		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00	
Psychological Testing (excludes report writing)	H2019				\$ 200	Per Hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	
Diagnostic Evaluation - Forensic (Master's Level)					\$ 300	Per Evaluation		\$3.00	\$12.00	\$18.00	\$33.00	\$57.00	\$90.00	\$132.00	\$183.00	\$243.00	\$270.00	\$285.00	\$300.00	
Brief Assessment																				
Brief Assessment Substance Abuse - ASAM, FARS, CFARS	H0001				\$ 80	Per Hr		\$3.00	\$3.20	\$4.80	\$8.80	\$15.20	\$24.00	\$35.20	\$48.80	\$64.80	\$72.00	\$76.00	\$80.00	
Brief Assessment Mental Health FARS/CFARS	H0031	GT			\$ 35	Per Event		\$3.00	\$3.00	\$3.00	\$3.85	\$6.65	\$10.50	\$15.40	\$21.35	\$28.35	\$31.50	\$33.25	\$35.00	
Brief Behavioral Status Eval (LPHA only)	H2010	HO/GT			\$ 35	Per Event		\$3.00	\$3.00	\$3.00	\$3.85	\$6.65	\$10.50	\$15.40	\$21.35	\$28.35	\$31.50	\$33.25	\$35.00	
Treatment Plan Development - Mental Health	H0032				\$ 130	Per Event		\$3.00	\$5.20	\$7.80	\$14.30	\$24.70	\$39.00	\$57.20	\$79.30	\$105.30	\$117.00	\$123.50	\$130.00	
Treatment Review - Mental Health	H0032	TS			\$ 85	Per Event		\$3.00	\$3.40	\$5.10	\$9.35	\$16.15	\$25.50	\$37.40	\$51.85	\$68.85	\$76.50	\$80.75	\$85.00	
Treatment Plan Development - Substance Abuse	T1007				\$ 130	Per Event		\$3.00	\$5.20	\$7.80	\$14.30	\$24.70	\$39.00	\$57.20	\$79.30	\$105.30	\$117.00	\$123.50	\$130.00	
Treatment Plan Review - Substance Abuse	T1007	TS			\$ 85	Per Event		\$3.00	\$3.40	\$5.10	\$9.35	\$16.15	\$25.50	\$37.40	\$51.85	\$68.85	\$76.50	\$80.75	\$85.00	
Mental Health Assessment & Treatment Plan Review	H0032	HO			\$ 175	Per Event		\$3.00	\$7.00	\$10.50	\$19.25	\$33.25	\$52.50	\$77.00	\$106.75	\$141.75	\$157.50	\$166.25	\$175.00	

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Board Approved 9/2017						Client Disc	100.00%	96.00%	94.00%	89.00%	81.00%	70.00%	56.00%	39.00%	19.00%	10.00%	5.00%	0.00%	
DESCRIPTIONS	HPCP	Modifiers	CPT	Modifiers	Full Fee	UNIT	Client Resp	COPAY	4.00%	6.00%	11.00%	19.00%	30.00%	44.00%	61.00%	81.00%	90.00%	95.00%	100.00%
Behavioral Health Screening, Mental Health	T1023	HE			\$ 120	Per hour		\$3.00	\$4.80	\$7.20	\$13.20	\$22.80	\$36.00	\$52.80	\$73.20	\$97.20	\$108.00	\$114.00	\$120.00
Behavioral Health Screening, Substance Abuse	T1023	HF			\$ 120	Per hour		\$3.00	\$4.80	\$7.20	\$13.20	\$22.80	\$36.00	\$52.80	\$73.20	\$97.20	\$108.00	\$114.00	\$120.00
Behavior Assessment	H0031	BA			\$ 385	Per Event			\$15.41	\$23.11	\$42.37	\$73.19	\$115.56	\$169.48	\$234.97	\$312.00	\$346.67	\$365.93	\$385.19
Behavior Reassessment	H0032	BA			\$ 193	Per Event			\$7.72	\$11.58	\$21.23	\$36.67	\$57.90	\$84.92	\$117.73	\$156.33	\$173.70	\$183.35	\$193.00
Behavioral Analysis - Lead Analyst	H2019	BA			\$ 76	Per hour			\$3.04	\$4.56	\$8.36	\$14.44	\$22.80	\$33.44	\$46.36	\$61.56	\$68.40	\$72.20	\$76.00
Infant Mental Health Pre- Post-Screening Services	T1023				\$ 120	Per hour		\$3.00	\$4.80	\$7.20	\$13.20	\$22.80	\$36.00	\$52.80	\$73.20	\$97.20	\$108.00	\$114.00	\$120.00
Mobile Crisis (Masters Degree)	H2011	HO/GT			\$ 60	Per 15 minutes		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Clinic Visit																			
MH -Vitals, specimen collection, injection	T1015	HE			\$ 25	Per Event		\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.25	\$22.50	\$23.75	\$25.00
SA -Vitals, specimen collection, injection, drug screen	T1015	HF			\$ 25	Per Event		\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.25	\$22.50	\$23.75	\$25.00
Group Therapy - in clinic	H2019	HQ	90853		\$ 80	Per Hr		\$3.00	\$3.20	\$4.80	\$8.80	\$15.20	\$24.00	\$35.20	\$48.80	\$64.80	\$72.00	\$76.00	\$80.00
Individual Therapy - In-clinic	H2019	HR/GT	90834		\$ 150	Per hour		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00
Family Therapy - in clinic	H2019	HR/GT	90847		\$ 150	Per hour		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00
On-site Therapy	H2019	HO			\$ 150	Per hour		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00
On-site - behavior management	H2019	HN			\$ 130	Per hour		\$3.00	\$5.20	\$7.80	\$14.30	\$24.70	\$39.00	\$57.20	\$79.30	\$105.30	\$117.00	\$123.50	\$130.00
On-site - support	H2019	HM			\$ 80	Per hour		\$3.00	\$3.20	\$4.80	\$8.80	\$15.20	\$24.00	\$35.20	\$48.80	\$64.80	\$72.00	\$76.00	\$80.00
Adult in Home Counseling	H2019	HB			\$ 140	Per hour		\$3.00	\$5.60	\$8.40	\$15.40	\$26.60	\$42.00	\$61.60	\$85.40	\$113.40	\$126.00	\$133.00	\$140.00
Medication Management	T1015	GT	99213		\$ 150	Per Event		\$3.00	\$6.00	\$9.00	\$16.50	\$28.50	\$45.00	\$66.00	\$91.50	\$121.50	\$135.00	\$142.50	\$150.00
Brief Medical Psychotherapy - Mental Health	H2010	HE/GT			\$ 120	Per Event		\$3.00	\$4.80	\$7.20	\$13.20	\$22.80	\$36.00	\$52.80	\$73.20	\$97.20	\$108.00	\$114.00	\$120.00
Group Medical Therapy	H2010	HQ			\$ 100	Per hour		\$3.00	\$4.00	\$6.00	\$11.00	\$19.00	\$30.00	\$44.00	\$61.00	\$81.00	\$90.00	\$95.00	\$100.00
Brief Medical Psychotherapy - Substance Abuse	H2010	HF/GT			\$ 100	Per Event		\$3.00	\$4.00	\$6.00	\$11.00	\$19.00	\$30.00	\$44.00	\$61.00	\$81.00	\$90.00	\$95.00	\$100.00
Behavioral Health Verbal interaction - Mental Health	H0046	GT			\$ 140	Per hour		\$3.00	\$5.60	\$8.40	\$15.40	\$26.60	\$42.00	\$61.60	\$85.40	\$113.40	\$126.00	\$133.00	\$140.00
Behavioral Health Verbal interaction - Substance Abuse	H0047	GT			\$ 140	Per hour		\$3.00	\$5.60	\$8.40	\$15.40	\$26.60	\$42.00	\$61.60	\$85.40	\$113.40	\$126.00	\$133.00	\$140.00
Day Treatment																			
Behavioral Health Day Service - Mental Health	H2012	GT			\$ 200	Per 4 hours		\$3.00	\$8.00	\$12.00	\$22.00	\$38.00	\$60.00	\$88.00	\$122.00	\$162.00	\$180.00	\$190.00	\$200.00
Behavioral Health Day Service - Substance Abuse	H2012	HF/GT			\$ 200	Per 4 hours		\$3.00	\$8.00	\$12.00	\$22.00	\$38.00	\$60.00	\$88.00	\$122.00	\$162.00	\$180.00	\$190.00	\$200.00
Psychosocial Rehabilitation	H2017				\$ 80	Per hour		\$3.00	\$3.20	\$4.80	\$8.80	\$15.20	\$24.00	\$35.20	\$48.80	\$64.80	\$72.00	\$76.00	\$80.00
Specialized Case Management	T1016				\$ 100	Per Hour		\$3.00	\$4.00	\$6.00	\$11.00	\$19.00	\$30.00	\$44.00	\$61.00	\$81.00	\$90.00	\$95.00	\$100.00
Specialized Therapeutic Foster Care Level I	S5145				\$ 150	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Specialized Therapeutic Foster Care Level II	S5145	HK			\$ 300	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Therapeutic Group Home	H0019		180		\$ 250	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Respite (in home)	H0046	HE			\$ 150	Per day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Targeted Case Management - Adult	T1017				\$ 100	Per hour		\$3.00	\$4.00	\$6.00	\$11.00	\$19.00	\$30.00	\$44.00	\$61.00	\$81.00	\$90.00	\$95.00	\$100.00
Targeted Case Management - Child	T1017	HA			\$ 100	Per hour		\$3.00	\$4.00	\$6.00	\$11.00	\$19.00	\$30.00	\$44.00	\$61.00	\$81.00	\$90.00	\$95.00	\$100.00
Intensive Case Management	T1017	HK			\$ 175	Per hour		\$3.00	\$7.00	\$10.50	\$19.25	\$33.25	\$52.50	\$77.00	\$106.75	\$141.75	\$157.50	\$166.25	\$175.00
Intervention/Psych-Ed Services																			
Intervention Group	H0004				\$ 40	Per Hour		\$3.00	\$3.00	\$3.00	\$4.40	\$7.60	\$12.00	\$17.60	\$24.40	\$32.40	\$36.00	\$38.00	\$40.00
Intervention Individual	H0004				\$ 76	Per Hour		\$3.00	\$3.04	\$4.56	\$8.36	\$14.44	\$22.80	\$33.44	\$46.36	\$61.56	\$68.40	\$72.20	\$76.00
After care																			
Individual					\$ 125	Per hour		\$3.00	\$5.00	\$7.50	\$13.75	\$23.75	\$37.50	\$55.00	\$76.25	\$101.25	\$112.50	\$118.75	\$125.00
Group					\$ 40	Per hour		\$3.00	\$3.00	\$3.00	\$4.40	\$7.60	\$12.00	\$17.60	\$24.40	\$32.40	\$36.00	\$38.00	\$40.00
Family Training & Counseling for Child Development	T1027				\$ 25	Per 15 minutes		\$3.00	\$3.00	\$3.00	\$3.00	\$4.75	\$7.50	\$11.00	\$15.25	\$20.25	\$22.50	\$23.75	\$25.00
Medication Assisted Treatment - exclusive of therapy services	H0020				\$ 190	Weekly		\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$115.90	\$153.90	\$171.00	\$180.50	\$190.00
Medication Assisted Treatment - Guest Registration					\$ 20	One time		\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00
Medication Assisted Treatment - Guest Dosing	H0020				\$ 22	Event		\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00
Medication Assisted Treatment - Buprenorphine (exclusive of therapy services)					\$ 160	Event		\$90.00	\$100.00	\$110.00	\$120.00	\$130.00	\$140.00	\$150.00	\$160.00	\$160.00	\$160.00	\$160.00	\$160.00
Outreach					\$ 43	Per Hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Prevention					\$ 75	Per Hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Jail Diversion Service	H2015	HE			\$ 80	Per hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Peer Services	H0038				\$ 70	Per Hour		\$3.00	\$3.00	\$4.20	\$7.70	\$13.30	\$21.00	\$30.80	\$42.70	\$56.70	\$63.00	\$66.50	\$70.00
Drop-in Center	S5102	HE			\$ 28	Per Day		\$3.00	\$3.00	\$3.00	\$3.08	\$5.32	\$8.40	\$12.32	\$17.08	\$22.68	\$25.20	\$26.60	\$28.00
Review of Records (MD)	H2000				\$ 50	per 15 minutes		\$3.00	\$3.00	\$3.00	\$5.50	\$9.50	\$15.00	\$22.00	\$30.50	\$40.50	\$45.00	\$47.50	\$50.00
Other Professional Services																			
Residence Fees at The Lodge (inclusive of meals, snacks, use of amenities)					\$ 250	Per Week		\$3.00	\$10.00	\$15.00	\$27.50	\$47.50	\$75.00	\$110.00	\$152.50	\$202.50	\$225.00	\$237.50	\$250.00

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							Client Disc	100.00%	96.00%	94.00%	89.00%	81.00%	70.00%	56.00%	39.00%	19.00%	10.00%	5.00%	0.00%
							Client Resp	COPAY	4.00%	6.00%	11.00%	19.00%	30.00%	44.00%	61.00%	81.00%	90.00%	95.00%	100.00%
DESCRIPTIONS	HCPC	Modifiers	CPT	Modifiers	Full Fee	UNIT													
Mental Health First Aid (full training including workbook)					\$ 50	Per attendee		\$3.00	\$3.00	\$3.00	\$5.50	\$9.50	\$15.00	\$22.00	\$30.50	\$40.50	\$45.00	\$47.50	\$50.00
External Consulting (Exclusive of travel expenses)																			
Executive Management Team/MD					\$ 2,000	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Vice President/Director level					\$ 1,000	Per Day		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
External Consulting (Exclusive of travel expenses)																			
Executive Management Team/MD					\$ 275	Per hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Vice President/Director level					\$ 200	Per hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
All Others					\$ 100	Per hour		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Speciality Assessment/Consultation/Expert Witness Services					\$ 900	Per hour													
Background Fees (by Level)																			
DCF, DJJ					\$ 38	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
FL Dept Agric & Consumer Svcs					\$ 45	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
AHCA, DOH					\$ 78	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Other: realtors, etc					\$ 54	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
VECHS employees					\$ 54	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
VECHS volunteers					\$ 44	Per Screen		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Primary Care Services																			
Established Patient Office Visits																			
Office Visit EST PT - LV 1 Brief			99211		\$115.00	Per Visit													
Office Visit EST PT - LV 2 Limited			99212		\$120.00	Per Visit													
Office Visit EST PT - LV 3 Expanded			99213		\$125.00	Per Visit													
Office Visit EST PT - LV 4 Extended			99214		\$130.00	Per Visit													
Office Visit EST PT - LV 4 Extended			99215		\$135.00	Per Visit													
New Patient Visits																			
Office Visit New PT - LV 1 Brief			99201		\$125.00	Per Visit													
Office Visit New PT - LV 2 Limited			99202		\$130.00	Per Visit													
Office Visit New PT - LV 3 Expanded			99203		\$140.00	Per Visit													
Office Visit New PT - LV 4 Extended			99204		\$189.00	Per Visit													
Office Visit New PT - LV 4 Extended			99205		\$250.00	Per Visit													
Wellness Visits																			
Annual wellness visit initial	GO438				\$212.00	Per Visit													
Annual wellness visit Subsequent	GO439				\$140.00	Per Visit													
PAP	Q0091				\$55.00	Per Event													
Pelvic & Breast Exam	GO101				\$47.00	Per Event													
Prostrate/PSA	GO101				\$35.00	Per Event													
Tobacco Counseling 3-10 min	GO436				\$15.00	Per Event													
Tobacco Counseling >10 min	GO437				\$48.00	Per Event													
Welcome to Medicare Exam	GO402				\$205.00	Per Visit													
ECG & Welcome to Medicare Exam	GO403				\$21.00	Per Visit													
Flu Shot	G0008				\$10.00	Per Event													
HEP B Shot	G0010				\$10.00	Per Event													
Pnumonia Shot	G0009				\$10.00	Per Event													
Well Visit 18-39 New			99385		\$185.82	Per Visit													
Well Visit 40-64 New			99386		\$185.82	Per Visit													