72 Hour Presumptive Eligibility Program
for Crisis Stabilization
Individuals 18 Years of Age and Older
Fee Schedule
July 1, 2013

I. Practitioner Services – Psychiatric Procedures

Mental health practitioners include physicians, physician assistants, nurse practitioners, psychologists, social workers, and professional counselors. Practitioners bill using standard CPT-4 procedure codes and are reimbursed according to the Department's RBRVS system. Please refer to http://medicaidprovider.hhs.mt.gov/ for the rates.

CPT Code	Procedure	Unit Time	Unit Limits	Psychologist / LCSW / LCPC	Psychiatrist / Physician / Mid-level Practitioner
90791	Psychiatric diagnostic interview evaluation (Assessment)	Per session	1 / 72 hour period	See RBRVS Schedule	See RBRVS Schedule
90792	Psychiatric diagnostic evaluation (medical)	Per session	1/72 hour period	See RBRVS Schedule	See RBRVS Schedule
90832	Brief Individual psychotherapy, office	16–37 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90833	Individual psychotherapy, office, w/ E&M	16–37 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90834	Individual psychotherapy	38–52 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90836	Individual psychotherapy, office, w/ E&M	38–52 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90832	Individual psychotherapy, inpatient, partial hospital, or residential	16–37 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90834	Individual psychotherapy, inpatient, partial hospital, or residential	38–52 min	1 / day	See RBRVS Schedule	See RBRVS Schedule
90837	Individual psychotherapy, office	>53 min	1/ day	See RBRVS Schedule	See RBRVS Schedule
90838	Individual psychotherapy, office with E/M	>53 min	1/day	See RBRVS Schedule	See RBRVS Schedule
90837	Individual psychotherapy, inpatient, partial hospital, or residential	>53 min	1/ day	See RBRVS Schedule	See RBRVS Schedule
90839	Psychotherapy for crisis	First 60 min	1/ day	By report (44% billed charges)	By report (44% billed charges)
90840	Psychotherapy for crisis	30 min	1/ day	By report (44% billed charges)	By report (44% billed charges)
90785	Interactive complexity	Per session	1/ day	See RBRVS Schedule	See RBRVS Schedule

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CPT Code	Procedure	Unit Time	Unit Limits	Psychologist / LCSW / LCPC	Psychiatrist / Physician / Mid-level Practitioner
90846	Family psychotherapy without patient	Per session	1 / day	See RBRVS Schedule	See RBRVS Schedule
90847	Family psychotherapy with patient	Per session	1 / day	See RBRVS Schedule	See RBRVS Schedule
90853	Group psychotherapy	Per session	1 / day	See RBRVS Schedule	See RBRVS Schedule

II. Practitioner Services – Evaluation & Management

Evaluation and Management Services may be provided by physicians, physician assistants, and nurse practitioners. Services are billed using standard CPT-4 procedure codes and are reimbursed according to the Department's RBRVS system.

CPT Codes	Procedure	Unit Time	Unit Limits	Psychiatrist / Physician / Mid-level Practitioner
99201 – 99205	Office/Outpatient Visit, New Patient	Per visit	1 / day	Same as RBRVS
99211 – 99215	Office/Outpatient Visit, Established Patient	Per visit	1 / day	Same as RBRVS
99217 – 99220	Observation Care	Per visit	1 / day	Same as RBRVS
99221 – 99223	Initial Hospital Care	Per visit	1 / day	Same as RBRVS
99231 – 99233	Subsequent Hospital Care	Per visit	1 / day	Same as RBRVS
99238 – 99239	Hospital Discharge Day	Per visit	1 / day	Same as RBRVS
99281 – 99285	Emergency Department Visit	Per visit	1 / day	Same as RBRVS

III. Acute Inpatient Services

Acute care hospital services are reimbursed by contract to enrolled hospitals. Please contact the Addictive & Mental Disorders Division at 1-406-444-3964 for information.

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IV. Care Coordination, Community-based Psychiatric Rehabilitation, and Crisis Management Services

Crisis management services are paid on an all-inclusive bundled hourly rate to enrolled hospitals and enrolled facilities such as licensed mental health centers. Reimbursement is subject to payment authorization (PA) and limits.

Service	Procedure Code	Modifier	Unit Time	Reimbursement	Limits	Management
Care Coordination	H2011		15 min	$12.24	12	Retrospective Review
Community-based psychiatric rehabilitation & support – individual	H2019		15 min	$6.61	None	Retrospective Review
Crisis Management Mental Health Center Day One	S9484	U1	1 hour	$17.00	24	Payment Authorized
Crisis Management Mental Health Center Day Two	S9484	U2	1 hour	$10.63	24	Payment Authorized
Crisis Management Mental Health Center Day Three	S9484	U3	1 hour	$6.38	24	Payment Authorized
Crisis Management Outpatient Hospital Day One	S9484 Revenue Code 762	U1	1 hour	$25.50	23	Payment Authorized
Crisis Management Inpatient Hospital Day One	S9484	U1	1 hour	$25.50	24	By Contract
Crisis Management Inpatient Hospital Day Two	S9484	U2	1 hour	$12.75	24	By Contract
Crisis Management Inpatient Hospital Day Three	S9484	U3	1 hour	$8.50	24	By Contract

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