

FRESNO COUNTY MHP INDIVIDUAL/GROUP PROVIDER CLAIMING TABLE (AUGUST 2023)

**Claiming for 79 Psychiatric Diagnostic Evaluation; 105 Targeted Case Management; 62 Mental Health Service Plan Developed by Non-Physician; and 90 Psychosocial Rehabilitation (no “add-on” code for 105, 62, or 90 as max claimed is 96 units but charges still reflect 15-minute increments for each unit added on to service similar to “add-on” code for 79)**

Range	CPT Code Equivalentents	Charges-licensed	Charges-Associates*
8-22 minutes	1 primary unit (15 minutes)	\$30.15	\$25.65
23-37 minutes	1 primary unit (15 min) + 1 add-on (15 min)	\$60.30	\$51.30
38-52 minutes	1 primary unit (15 min) + 2 add-on (30 min)	\$90.45	\$76.95
53--67 minutes	1 primary unit (15 min) + 3 add-on (45 min)	\$120.60	\$102.60
68-82 minutes	1 primary unit (15 min) + 4 add-on (60 min)	\$150.75	\$128.25
83-97 minutes	1 primary unit (15 min) + 5 add-on (75 min)	\$180.90	\$153.90
98-112 minutes	1 primary unit (15 min) + 6 add-on (90 min)	\$211.05	\$179.55
113-127 minutes	1 primary unit (15 min) + 7 add-on (105 min)	\$241.20	\$205.20

**Claiming for 93 Psychotherapy with Patient (Varying CPT code equivalentents as primary)**

Range	CPT Code Equivalentents	Charges-licensed	Charges-Associates*
16-37 minutes	1 primary unit (30 minutes)	\$60.30	\$51.30
38-52 minutes	1 primary unit (45 minutes)	\$90.45	\$76.95
53--67 minutes	1 primary unit (60 minutes)	\$120.60	\$102.60
68-82 minutes	1 primary unit (60 min) + 1 add-on (15 min)	\$150.75	\$128.25
83-97 minutes	1 primary unit (60 min) + 2 add-on (30 min)	\$180.90	\$153.90

***\*Note when rendering provider is a registered Associate, all service claims must include the “HL” modifier.***

***\*\*The direct service time claimed should reflect the time person served was participating in the group session (a.k.a. direct service time), and only the charges (not the time claimed) are adjusted to reflect the 4.5 rate adjustment. Time claimed should be adjusted for late arrival/early departure to the group session of the person served.***

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**Claiming for 34 Family Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 minutes**

Range	CPT Code Equivalentents	Charges-licensed	Charges-Associates*
26-57 minutes	1 primary unit (50 minutes)	\$100.50	\$85.50
58-72 minutes	1 primary unit (50 min) + 1 add-on (15 min)	\$130.65	\$111.15
73-87 minutes	1 primary unit (50 min) + 2 add-on (30 min)	\$160.80	\$136.80
88-102 minutes	1 primary unit (50 min) + 3 add-on (45 min)	\$190.95	\$162.45

**Claiming for 36 Group Psychotherapy (Other Than of a Multiple-Family Group), 15 Minutes**

*Charges for group therapy will reflect an adjusted rate by 4.5 per DHCS guidelines. Providers should submit claims separately for each beneficiary receiving group therapy and add the "HQ" modifier to all group psychotherapy claim lines. If time needs to be added to the primary CPT code 90849 (multiple-family group psychotherapy) or 90853 (group psychotherapy other than multiple-family group), SmartCare will use add-on code G2212 with HQ modifier. Charges will reflect adjustment to the rate of the add-on code to group therapy by 4.5 as well.*

Range**	CPT Code Equivalentents	Charges – licensed	Charges – Associates*
8-22 minutes	1 primary unit (15 minutes)	\$6.70	\$5.70
23-37 minutes	1 primary unit (15 min) + 1 add-on (15 min)	\$13.40	\$11.40
38-52 minutes	1 primary unit (15 min) + 2 add-on (30 min)	\$20.10	\$17.10
53-67 minutes	1 primary unit (15 min) + 3 add-on (45 min)	\$26.80	\$22.80
68-82 minutes	1 primary unit (15 min) + 4 add-on (60 min)	\$33.50	\$28.50
83-97 minutes	1 primary unit (15 min) + 5 add-on (75 min)	\$40.20	\$34.20
98-112 minutes	1 primary unit (15 min) + 6 add-on (90 min)	\$46.90	\$39.90
113-127 minutes	1 primary unit (15 min) + 7 add-on (105 min)	\$53.60	\$45.60

*\*Note when rendering provider is a registered Associate, all service claims must include the "HL" modifier.*

**\*\*The direct service time claimed should reflect the time person served was participating in the group session (a.k.a. direct service time), and only the charges (not the time claimed) are adjusted to reflect the 4.5 rate adjustment. Time claimed should be adjusted for late arrival/early departure to the group session of the person served.**