

| Threshold Services | | | | |
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| CCBHC Service Category | Code | Modifier | Definition | Termination Date |
| Criteria 4.C. Crisis Behavioral Health Services | G0017 | | Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for psychotherapy for crisis service applies, other than the office setting); first 60 minutes | |
| Criteria 4.C. Crisis Behavioral Health Services, | G0018 | | Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for psychotherapy for crisis service applies, other than the office setting); each additional 30 minutes – list separately in addition to code for primary service | |
| Criteria 4.C. Crisis Behavioral Health Services | H0007 | | Alcohol/drug crisis intervention/outpatient | |
| Criteria 4.C. Crisis Behavioral Health Services | H2011 | U3 | Crisis intervention service - mobile crisis response. Use modifier U3 when billing PPS. | |
| Criteria 4.C. Crisis Behavioral Health Services | S9484 | TF | Crisis intervention mental health services, per hour. Use modifier TF for community. No residential may be billed under PPS. | |
| Criteria 4.C. Crisis Behavioral Health Services | S9485 | TF | Crisis intervention mental health services, per diem. Use modifier TF for community. No residential may be billed under PPS. | |
| Criteria 4.C. Crisis Behavioral Health Services | 90839 | | Psychotherapy for crisis; first 60 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | 90785 | | Interactive complexity (List separately in addition to the code for primary procedure) | |
| Criteria 4D: Screening, Assessment and Diagnosis | 90791 | | Psychiatric diagnostic evaluation | |
| Criteria 4D: Screening, Assessment and Diagnosis | 90792 | | Psychiatric diagnostic evaluation with medical services | |
| Criteria 4D: Screening, Assessment and Diagnosis | 90887 | | Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient | |

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| Criteria 4D: Screening, Assessment and Diagnosis | 96127 | | Brief emotional behavioral assessment-Comm MH | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96130 | | Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96131 | | Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure) | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96136 | | Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96137 | | Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure) | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96138 | | Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96139 | | Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure) | |

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| Criteria 4D: Screening, Assessment and Diagnosis | 96156 | | HLTH BHV ASSMT/REASSESSMENT | |
| Criteria 4D: Screening, Assessment and Diagnosis | 99408 | | Alcohol/sub abuse screen & intervention 15-30 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | 99409 | | AUDIT/DAST OVER 30 MINUTES | |
| Criteria 4D: Screening, Assessment and Diagnosis | G0396 | | Alcohol &/or sub misuse assessment 15-30 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | G0397 | | Alcohol %/or sub misuse assessment >30 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | G0442 | | Annual alcohol screen 15 minutes | |
| Criteria 4D: Screening, Assessment and Diagnosis | G0444 | | Depression screen annual | |
| Criteria 4D: Screening, Assessment and Diagnosis | H0003 | | ALCOHOL/DRUG SCREENING | |
| Criteria 4D: Screening, Assessment and Diagnosis | H0031 | | Mental health assessment, by nonphysician | |

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| Criteria 4D: Screening, Assessment and Diagnosis | H0049 | | Alcohol and/or drug screening | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96137 | | Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure) | |
| Criteria 4D: Screening, Assessment and Diagnosis | 96138 | | Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes | |
| Criteria 4E: Person-Centered and Family-Centered Treatment Planning | H0032 | | Mental health service plan development by nonphysician | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90832 | | Psychotherapy, 30 minutes with patient | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90833 | | Psychotherapy, 30 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90834 | | Psychotherapy, 45 minutes with patient | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90836 | | Psychotherapy, 45 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90837 | | Psychotherapy, 60 minutes with patient | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90838 | | Psychotherapy, 60 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90840 | | Psychotherapy for crisis; each additional 30 minutes (List separately in addition to code for primary service) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90846 | | Family psychotherapy (without the patient present), 50 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90847 | | Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90849 | | Multiple-family group psychotherapy | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90853 | | Group psychotherapy (other than of a multiple-family group) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90863 | | Pharmacologic management with psychotherapy | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90875 | | Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 30 minutes | |
| Criteria 4E: Person-Centered and Family-Centered Treatment Planning | H0032 | | Mental health service plan development by nonphysician | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90832 | | Psychotherapy, 30 minutes with patient | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90833 | | Psychotherapy, 30 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90876 | | Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 45 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 90899 | | Unlisted psychiatric service or procedure | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 96116 | | Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to- face time with the patient and time interpreting test results and preparing the report; first hour | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 96121 | | Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to- face time with the patient and time interpreting test results and preparing the report; each additional hour (List separately in addition to code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 96132 | | Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and | |

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| | | | interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 96133 | | Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99202 | | Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99203 | | Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99204 | | Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99205 | | Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter. | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99211 | | Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99212 | | Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99213 | | Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99214 | | Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99215 | | Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter. | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99417 | | Prolonged outpatient evaluation and management service(s) time with or without direct patient contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time (List separately in addition to the code of the outpatient Evaluation and Management service) | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99499 | | Unlisted evaluation and management service | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | 99510 | | Home visit for individual, family, or marriage counseling | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G0443 | | Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G0445 | | Semiannual high intensity behavioral counseling to prevent STIs, individual, face-to-face, includes education skills training & guidance on how to change sexual behavior | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G0446 | | Intensive behavioral therapy 15 min: Annual, face to face intensive behavioral health therapy for cardiovascular disease, individual | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G0473 | | Face to face behavioral counseling for Obesity, group (2- 10), 30 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2068 | | Medication assisted treatment, buprenorphine (oral); weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2069 | | Medication assisted treatment, buprenorphine (injectable); weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2073 | | Medication assisted treatment, naltrexone; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled opioid treatment program) | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2074 | | Medication assisted treatment, weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy and toxicology testing | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2075 | | Medication Assisted Treatment, Medication not otherwise specified; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare enrolled opioid treatment program) | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2079 | | Take home supply of buprenorphine (oral); up to 7 additional day supply (provision of the services by a Medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | G2080 | | Each additional 30 minutes of counseling in a week of medication assisted treatment, (provision of the services by a Medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0004 | | Behavioral health counseling and therapy, 15 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0015 | | Alcohol and/or drug services, intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan), including assessment, counseling; crisis intervention, and activity therapies or education | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0040 | | Assertive Community Treatment | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0046 | | Mental health services, not otherwise specified | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0050 | | Alcohol and/or drug services, brief intervention, per 15 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0571 | | Buprenorphine, oral, 1 mg | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0572 | | Buprenorphine/naloxone, oral, less than or equal to 3 mg buprenorphine | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0573 | | Buprenorphine/naloxone, oral, greater than 3 mg, but less than or equal to 6 mg buprenorphine | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0574 | | Buprenorphine/naloxone, oral, greater than 6 mg, but less than or equal to 10 mg buprenorphine | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0575 | | Buprenorphine/naloxone, oral, greater than 10 mg buprenorphine | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0577 | | Injection, buprenorphine extended-release (Brixadi), less than or equal to 7 days of therapy | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0578 | | Injection, buprenorphine extended-release (Brixadi), greater than 7 days and up to 28 days of therapy | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | J0592 | | Injection, buprenorphine HCl, 0.1 mg | |

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| Criteria 4F: Outpatient Mental Health and Substance Use Services | J2315 | | Injection, naltrexone, depot form, 1 mg | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | Q9991 | | Injection, buprenorphine extended-release (Sublocade), less than or equal to 100 mg | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | Q9992 | | Injection, buprenorphine extended-release (Sublocade), greater than 100 mg | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99401 | | Preventative Medicine counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99402 | | Preventative Medicine counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0046 | | Mental health services, not otherwise specified | |
| Criteria 4F: Outpatient Mental Health and Substance Use Services | H0050 | | Alcohol and/or drug services, brief intervention, per 15 minutes | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99403 | | Preventative Medicine Counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99404 | | Preventative Medicine Counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes | |

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| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | G2077 | | Periodic assessment: assessing periodically by qualified personnel to determine the most appropriate combination of services and treatment/provision of the services by a Medicare-enrolled opioid treatment program; list separately in addition to code for primary procedure | |
| Criteria 4I. Psychiatric Rehabilitative Services | 90846 | HK | Functional Family Therapy-family therapy without youth present, use HK modifier, provider types HP, HO, AF, SA | |
| Criteria 4I. Psychiatric Rehabilitative Services | 90847 | HK | Functional Family Therapy-family therapy with youth present, use HK modifier, provider types HP, HO, AF, SA | |
| Criteria 4I. Psychiatric Rehabilitative Services | H0034 | | Medication training and support, per 15 minutes | |
| Criteria 4I. Psychiatric Rehabilitative Services | H2012 | | Behavioral health day treatment, per hour | |
| Criteria 4I. Psychiatric Rehabilitative Services | H2033 | | Multisystemic therapy, per 15 minutes | |
| Criteria 4I. Psychiatric Rehabilitative Services | S9480 | | Intensive outpatient psychiatric services, per diem | |
| Criteria 4J. Peer Supports, Peer Counseling and Family/Caregiver Supports | H0038 | | Self-help/peer services, per 15 minutes | |
| Criteria 4J. Peer Supports, Peer Counseling and Family/Caregiver | T1027 | | FAMILY TRAINING & COUNSELING/PER 15 MINUTES | |

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| Supports | | | | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99403 | | Preventative Medicine Counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | 99404 | | Preventative Medicine Counseling/risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes | |
| Criteria 4G: Outpatient Clinic Primary Care Screening and Monitoring | G2077 | | Periodic assessment: assessing periodically by qualified personnel to determine the most appropriate combination of services and treatment/provision of the services by a Medicare-enrolled opioid treatment program; list separately in addition to code for primary procedure | |

