Community Mental Health Center (CMHC) and Certified Community Behavioral Health Clinic (CCBHC) Services Fee Schedule (effective 4/1/2026)

Crisis, treatment, and recovery services provided by Iowa CMHCs and CCBHCs may be billed based on the following fee schedule. The rates in this fee schedule are effective for dates of service beginning 4/1/2026.

Providers may only bill for services for which they are qualified under the scope of their licensure, certification, or accreditation and adhere to the Iowa Medicaid service-specific policies, unless otherwise specified in the SNMIS Billing Guide. Providers must be enrolled under Iowa Medicaid Provider Type 21 (CMHC) or Provider Type 88 (CCBHC) and be registered for the SNMIS line of business.

All claims on this fee schedule must be billed on the Professional claim form.

New additions are highlighted in yellow and are effective for date of service beginning 7/1/2026.

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
90791	--	Diagnostic Evaluation	Integrated behavioral health assessment, including history, mental status, and recommendations. Also includes crisis evaluation.	Per Evaluation	$202.98	Valid POS codes: Any
90792	--	Diagnostic Interview with Medical Services	Integrated behavioral health diagnostic assessment, with medical services Note: this code may be used for billing the initial medical assessment for Medications for Opioid Use Disorder (MOUD)	Per Evaluation	$230.44	Valid POS codes: Any
90832	--	Psychotherapy, Individual, 30 mins	Psychotherapy services 30 minutes with patient by a licensed mental health provider	30 Minutes	$69.77	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
90833	--	Psychotherapy, Individual, 30 mins, with E&M	Psychotherapy services 30 minutes with patient, add-on to evaluation and management visit	30 Minutes	$74.31	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90834	--	Psychotherapy, Individual, 45 mins	Psychotherapy services 45 minutes with patient by a licensed mental health provider	45 Minutes	$134.03	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90836	--	Psychotherapy, Individual, 45 mins, with E&M	Psychotherapy services 45 minutes with patient, add-on to evaluation and management visit	45 Minutes	$86.69	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90837	--	Psychotherapy, Individual, 60 mins	Psychotherapy services 60 minutes with patient by a licensed mental health provider	60 Minutes	$134.03	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90838	--	Psychotherapy, Individual, 60 mins, with E&M	Psychotherapy services 60 minutes with patient, add-on to evaluation and management visit	60 Minutes	$99.08	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90839	--	Psychotherapy for crisis, initial 60 minutes	Psychotherapy for Crisis, first hour, including urgent assessment and history of the crisis state, mental status exam, and disposition.	60 Minutes	$113.51	Valid POS codes: 03, 11, 12, 15, 16, 17, 19, 20, 21, 22, 27, 53, 57, 58, 71, 72 Unit Maximum: 1 Unit
90840	--	Psychotherapy for crisis, additional 30 minutes	Psychotherapy for Crisis, add-on for each additional 30 minutes	30 Minutes	$45.40	Valid POS codes: 03, 11, 12, 15, 16, 17, 19, 20, 21, 22, 27, 53, 57, 58, 71, 72 Unit Maximum: 3 Units

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
90846	--	Psychotherapy, Family Therapy without Patient, 50 mins	Family Psychotherapy services without patient, 50 minutes by a licensed mental health provider	50 Minutes	$100.58	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90846	HK	Psychotherapy, Family Therapy without Patient, 50 mins	Functional Family Therapy (FFT), without patient, 50 minutes by a licensed mental health provider	50 Minutes	$170.42	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90847	--	Psychotherapy, Family Therapy with Patient, 50 mins	Family Psychotherapy services with patient, 50 minutes by a licensed mental health provider	50 Minutes	$100.58	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90847	HK	Psychotherapy, Family Therapy without Patient, 50 mins	Functional Family Therapy (FFT) with patient, 50 minutes by a licensed mental health provider	50 Minutes	$170.42	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90849	--	Psychotherapy, Multi-family Group Therapy, 60 mins	Multi-Family Group Psychotherapy services, 60 minutes by a licensed mental health provider	60 Minutes	$68.94	Valid POS codes: 02, 10, 11, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
90853	HE	Psychotherapy, Group Psychotherapy	Mental Health Group Psychotherapy services, 60 minutes by a licensed mental health provider	60 Minutes	$68.94	Valid POS codes: 02, 10, 11, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
96127	--	Brief Emotional-Behavioral Assessment	Brief assessment using standardized instrument	Per Assessment	$63.54	Valid POS codes: Any

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
96130		Psychological Test Evaluation, First Hour	Psychological Test Evaluation, by Psychologist or Qualified Professional, First Hour	60 Minutes	$189.53	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96131		Psychological Test Evaluation, Additional Hour	Psychological Test Evaluation, by Psychologist or Qualified Professional, Each Addtl Hour	60 Minutes	$189.53	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96132		Neuropsychological Test Evaluation, First Hour	Neuropsychological Test Evaluation, by Psychologist or Qualified Professional, First Hour	60 Minutes	$85.58	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96133		Neuropsychological Test Evaluation, Additional Hour	Neuropsychological Test Evaluation, by Psychologist or Qualified Professional, Each Addtl Hour	60 Minutes	$85.58	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96136		Psychological or neuropsych test admin/scoring by professional, 30 mins	Psychological or neuropsychological test administration and scoring by Psychologist or Qualified Professional, 30 mins	30 Minutes	$94.77	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96137		Psychological or neuropsych test admin/scoring by professional, Addtl 30 mins	Psychological or neuropsychological test administration and scoring by Psychologist or Qualified Professional, Additional 30 mins	30 Minutes	$94.77	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96138		Psychological or neuropsych test admin/scoring by technician, first 30 minutes	Psychological or neuropsychological test administration and scoring by technician, first 30 minutes	30 Minutes	$40.50	Valid POS codes: 02, 03, 10, 11, 12, 14, 21

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
96139		Psychological or neuropsych test admin/scoring by technician, each additional 30 minutes	Psychological or neuropsychological test administration and scoring by technician, each additional 30 minutes	30 Minutes	$40.50	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
96372		Administration of Long Acting Injectable	Administration of Long Acting Injectable - Intramuscular or subcutaneous	Per Injection	$3.97	Valid POS codes: 02, 03, 10, 11, 12, 14, 21
99202	--	Psychiatric Visit, New patient, straightforward, avg 15 mins	Psychiatric Outpatient Office Visit, New Patient, with straightforward medical decision making, 15 minutes	15 Minutes	$64.87	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99203	--	Psychiatric Visit, New patient, low, avg 30 mins	Psychiatric Outpatient Office Visit, New Patient, with low level of medical decision making, 30 minutes	30 Minutes	$129.74	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99204	--	Psychiatric Visit, New patient, moderate, avg 45 mins	Psychiatric Outpatient Office Visit, New Patient, with moderate level of medical decision making, 45 minutes	45 Minutes	$194.62	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99205	--	Psychiatric Visit, New patient, high, avg 60 mins	Psychiatric Outpatient Office Visit, New Patient, with high level of medical decision making, 60 minutes	60 Minutes	$259.49	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99211	--	Psychiatric Visit,	Psychiatric Outpatient Office Visit, Established Patient, for	5 Minutes	$22.01	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
		Established patient, may not req physician, avg 5 mins	Evaluation and Management that may not require presence of healthcare professional, Avg 5 minutes			
99212	--	Psychiatric Visit, Established patient, straightforward, avg 10 mins	Psychiatric Outpatient Office Visit, Established Patient, with straightforward medical decision making, 10 minutes	10 Minutes	$49.17	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99213	--	Psychiatric Visit, established patient, low, avg 20 mins	Psychiatric Outpatient Office Visit, Established Patient, with low level of medical decision making, 20 minutes	20 Minutes	$71.94	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99214	--	Psychiatric Visit, established patient, moderate, avg 30 mins	Psychiatric Outpatient Office Visit, Established Patient, with moderate level of medical decision making, 30 minutes	30 Minutes	$91.46	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
99215	--	Psychiatric Visit, Established patient, high, avg 40 mins	Psychiatric Outpatient Office Visit, Established Patient, with high level of medical decision making, 40 minutes	40 Minutes	$127.38	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
A0170		Transportation	Gas Card	Per Card	$25.00	Provider issues a $20 card to the client and keeps a $5 admin fee.

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
						Not allowable for persons eligible for Medicaid. Maximum 1 card per week per client. Provider must obtain receipt from the individual documenting the gas purchase. Valid POS codes: Any
H0004	HE	Substance Use Disorder Counseling, 15 min	Substance use disorder counseling and therapy, per 15 minutes	15 Minutes	$22.16	Providers must be licensed under Iowa Code Ch. 125 to provide substance use disorder treatment. Valid POS codes: 02, 10, 11, 12, 55, 57, 58
H0015	HE	Alcohol, drug and/or gambling services; intensive outpatient	Alcohol, drug and/or gambling services; intensive outpatient	Daily	$190.11	Providers must be licensed under Iowa Code Ch. 125 to provide substance use disorder treatment. 1 Unit Per Day; Max of 3 Units per 7-day period. Valid POS codes: 02, 55, 57, 58 Date span billing is allowable
H0037	--	Community Psychiatric Supportive Treatment Program	Mental Health Community Support Program, Monthly, Low Intensity	Monthly	$172.58	Valid POS codes: 02, 55, 57, 58
H0037	TF	Community Psychiatric Supportive	Mental Health Community Support Program, Monthly, High Intensity	Monthly	$487.00	Valid POS codes: 02, 55, 57, 58

See Modifier Code List or Place of Service Code List

Procedure Code	Modifier	Service Name	Description	Unit Type	Rate	Billing Requirements & Limitations
		Treatment Program				
H0038		Peer Support	Peer Support or Family Peer Support, 15-min	15 Minutes	$19.96	Providers must be enrolled with Iowa Medicaid to provide B-3 Peer Support services. Valid POS codes: Any
H0040	--	Assertive Community Treatment	Assertive Community Treatment Program, Daily	Daily	$83.91	Limitation: Reimbursable a maximum of 5 days per week Valid POS codes: Any
H0050	--	SBIRT	Alcohol, Gambling and/or Drug Screening, Brief Intervention (referral to treatment)	15 Minutes	$20.00	Valid POS codes: 03,04,16, 27
H2033		Multi-Systemic Therapy	Multi-Systemic Therapy, Per 15 Minutes	15 Minutes	$47.90	Valid POS codes: 02, 10, 11, 12, 17, 19, 20, 22, 27, 53, 57, 58, 71, 72
J1630		Haldol Long Acting Injectable	Haldol Injection, long-acting, up to 5mg	Per Injection	$3.04	Valid POS codes: Any
J2358		Olanzapine Long Acting Injectable	Olanzapine Injection, long-acting, 1mg	Per Injection	$2.84	Valid POS codes: Any
J2794		Risperidone Long Acting Injectable	Risperidone Injection, long-acting, 0.5mg	Per Injection	$12.45	Valid POS codes: Any
S9480	--	Intensive Outpatient Program	Mental Health Intensive Outpatient Program, Per Diem	Daily	$96.48	Valid POS codes: Any

See Modifier Code List or Place of Service Code List

Modifier Key:

HE: Mental Health Program
HK: Specialized Mental Health Program
TF: High Intensity

Place of Service Code Key:

02 Telehealth
03 School
04 Homeless Shelter
10 Telehealth in patient home
11 Office
12 Patient's Home
14 Group Home
15 Mobile Unit
16 Temporary Lodging
17 Walk-in Retail Health Clinic
19 Off Campus Outpatient Hospital
20 Urgent Care Facility
21 Inpatient Hospital
22 On Campus Outpatient Hospital
27 Outreach Street
53 CMHC
55 Residential Substance Abuse Treatment Facility
57 Non-Residential Substance Abuse Treatment Facility
58 Non-Residential Opioid Treatment Facility
71 State or Local Public Health Clinic
72 Rural Health Clinic

See Modifier Code List or Place of Service Code List