

Activity	Billable Unit	Standard fee	Plain Language description
Screening Tool	each	\$42	
Integrated Behavioral Health Assessment	each	\$495	
Substance Use Assessment	each	\$230	
Mental Health Assessment	each	\$430	
Psychiatric Assessment	each	\$565	
Pharmacological Management	each	\$150	
Psych Testing Feedback	each	\$140	
ASAM 1.0 Individual	15 min	\$26	Outpatient counseling (ASAM 1.0)
ASAM 1.0 Group (adolescent)	15 min	\$10	Outpatient counseling group
ASAM 2.1 IOP Individual	15 min	\$30	Intensive outpatient counseling (ASAM 2.1)
ASAM 2.1 IOP Group	15 min	\$10	Intensive outpatient counseling group
Intensive Case Management	15 min	\$30	
Community Recovery Support Individual	15 min	\$22	
Community Recovery Support Group	15 min	\$6	
Individual Psychotherapy	60 min	\$140	
Group Psychotherapy	60 min	\$60	
Family Psychotherapy with client	60 min	\$140	
Family Psychotherapy without client	60 min	\$140	
Multi Family Group Psychotherapy	60 min	\$60	
Crisis Intervention	60 min	\$128	
Crisis Stabilization	15 min	\$26	
Daily Rate 3.1	day	\$360	
Daily Rate 3.5	day	\$500	
ASAM 2.5 Partial Hospitalization	day	\$500	
Treatment Plan Development and Review	each	\$140	
SUD Care Coordination	month	\$300	
Peer based crisis services	15 min	\$22	

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CPT Codes

90899

90791

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H2010

96130

H0007

H0007 HQ

H0015

H0015 HQ

H0023

H2021

H2021 HQ

90837

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90847

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90849

S9484

H2011

H2036

H0047

H0035

T1007

H0047

H0038

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