

**MEDICAID TO SCHOOLS  
PROCEDURE CODES AND FEE SCHEDULE  
EFFECTIVE SEPTEMBER 2021**

<b>OCCUPATIONAL THERAPY SERVICES</b>									
Proc Code	Mod 1	Mod 2	Mod 3	MMIS Rate Prior to 12/31/2019	MMIS Rate Effective 1/1/2020	MMIS Rate Effective 1/1/2021	Unit	Max Units Allowed	Description
97165	TM			\$43.17	\$44.51	\$45.89	EV-Eval	1	Evaluation of occupational therapy, typically 30 minutes
97166	TM			\$64.75	\$66.76	\$68.83	EV-Eval	1	Evaluation of occupational therapy, typically 45 minutes
97167	TM			\$86.34	\$89.02	\$91.78	EV-Eval	1	Evaluation of occupational therapy established plan of care, typically 60 minutes
97168	TM					\$58.13	EV-Eval	1	Re-evaluation of occupational therapy, established plan of care; typically 30 minutes
97530	TM			\$14.07	\$14.51	\$14.96	15 Mins	8	Therapeutic activities to improve function, individual; each 15 minutes
97530	TM	HQ		\$4.69	\$4.84	\$4.99	15 Mins	8	Therapeutic activities to improve function, deliver to two or more patients in a group, each 15 minutes
97533	TM					\$18.12	15 Mins	8	Sensory integration to enhance processing and adaptation to environmental demands, each 15 minutes
T1999	TM					\$50.00	Materials	4	Miscellaneous Therapeutic items and Supplies.
Note: Shaded area means the procedure code is new effective 9-1-2021									

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<b>PHYSICAL THERAPY SERVICES</b>									
Proc Code	Mod 1	Mod 2	Mod 3	MMIS Rate Prior to 12/31/2019	MMIS Rate Effective 1/1/2020	MMIS Rate Effective 1/1/2021	Unit	Max Units Allowed	Description
97161	TM			\$47.60	\$49.08	\$50.60	EV-Eval	1	Evaluation of physical therapy, typically 20 minutes
97162	TM			\$47.60	\$49.08	\$50.60	EV-Eval	1	Evaluation of physical therapy, typically 30 minutes
97163	TM			\$47.60	\$49.08	\$50.60	EV-Eval	1	Evaluation of physical therapy, typically 45 minutes
97164	TM					\$34.48	EV-Eval	1	Re-evaluation of physical therapy, typically 20 minutes
97110	TM					\$24.22	15 Mins	8	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97150	TM	HQ	U2			\$10.63	15 Mins	8	PT therapeutic intervention/treatment delivered to two or more patients in a group; 15 minutes per unit
97112	TM					\$24.71	15 Mins	8	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
97116	TM					\$21.44	15 Mins	8	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)
T1999	TM					\$50.00	Materials	4	Miscellaneous Therapeutic items and Supplies.

Procedure Code 97799 TM is inactivated effective 8/31/2021

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<b>SPEECH AND LANGUAGE THERAPY SERVICES</b>									
PROC CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
92507	TM			\$14.07	\$14.51	\$14.96	15 Mins	8	Individual Treatment of speech, language, voice, communication and/or hearing processing disorder
92508	TM	HQ		\$9.38	\$9.67	\$9.97	30 Mins	8	Group treatment of speech, language, voice, communication, and/or hearing processing disorder
92521	TM			\$114.27	\$117.81	\$121.46	Eval	1	Evaluation of speech fluency
92522	TM			\$92.78	\$95.66	\$98.63	Eval	1	Evaluation of speech sound production
92523	TM			\$192.73	\$198.70	\$204.86	Eval	1	Evaluation of speech sound production with evaluation of language comprehension and expression
92524	TM			\$96.72	\$99.72	\$102.81	Eval	1	Evaluation of Behavioral and qualitative analysis of voice and resonance
92526	TM					\$83.11	Unit size required	1	Individual Treatment of swallowing dysfunction and/or oral function for feeding
92610	TM					\$82.86	Eval	1	Evaluation of oral and pharyngeal swallowing function

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<b>NURSING SERVICES</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
S9123	TM					\$55.28	Per Hour	8	RN in school 1:1 nursing
S9124	TM					\$51.02	Per Hour	8	LPN in school 1:1 nursing
T1001	TM			\$28.13	\$29.00	\$29.90	30 Mins	16	Nursing Assessment/Evaluation
T1002	TM			\$14.07	\$14.51	\$14.96	15 Mins	32	RN Services, up to 15 minutes
T1003	TM					\$13.76	15 Mins	32	LPN Services
T1999	TM					\$50.00	Materials	4	Miscellaneous Therapeutic items and Supplies.

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<b>AUDIOLOGY/HEARING SERVICES</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
92551	TM					\$5.32	Eval	1	Pure tone hearing test, air
92552	TM					\$7.97	Eval	1	Pure tone, audiometry, air only
92553	TM					\$10.63	Eval	1	Audiometry air & bone
92555	TM					\$5.32	Eval	1	Speech threshold audiometry
92556	TM					\$15.95	Eval	1	Speech Audiometry threshold; w/ Speech Recognition
92557	TM					\$26.58	Eval	1	Comprehensive audiometry threshold eval & Speech recognition
92567	TM					\$8.51	Eval	1	Tympanometry (Impedance Testing)
92568	TM					\$7.97	Eval	1	Acoustic reflect testing; threshold
92570	TM					\$14.65	Eval	1	Acoustic immittance testing
92579	TM					\$17.18	Eval	1	Visual audiometry (vra)
92582	TM					\$7.97	Eval	1	Conditioning play audiometry
92587	TM					\$30.03	Eval	1	Evoked auditory test limited
92588	TM					\$48.90	Eval	1	Evoked auditory test complete
92620	TM					\$59.91	60 Mins	1	Auditory function
92621	TM					\$14.35	15 Mins	4	Central Auditory Function w/Report; EA Additional 15 mins

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<b>VISION SERVICES</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
92002	TM					\$43.66	Visit	1	Eye & Medical Exam for diagnosis and treatment; new patient
92012	TM					\$40.07	Visit	1	Eye Exam; Estab Patient
V2799	TM			\$23.13	\$23.85	\$24.59	Each	32	Vision item or service, miscellaneous
Note: Shaded area means the procedure code is new effective 9-1-2021									

<b>APPLIED BEHAVIORAL ANALYSIS</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
97151	TM					\$15.95	15 min	8	Behavior identification assessment, face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan.
97153	TM					\$17.27	15 min	32	Adaptive behavior treatment by protocol, administered by technician under direction of qualified health care professional to one patient
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<b>REHABILITATIVE ASSISTANCE</b>									
CODE	MOD 1	MOD 2	MOD 3	RATE PRIOR TO 12/31/19	RATE EFFECTIVE 1/1/2020	RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
H2017	TM			\$5.94	\$6.12	\$6.31	15 min	48	Psychosocial rehabilitation services
H2017	TM	HQ		\$3.13	\$3.23	\$3.33	15 min	48	Psychosocial rehabilitation services

<b>PSYCHOTHERAPY/MENTAL HEALTH</b>									
CODE	MOD 1	MOD 2	MOD 3	RATE PRIOR TO 12/31/19	RATE EFFECTIVE 1/1/2020	RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
90791	TM			\$60.00	\$61.86	\$63.78	30 Eval	1	Psychiatric Diagnostic Evaluation
90832	TM			\$50.00	\$51.55	\$53.15	30 Min	1	Individual Mental Health Psychotherapy, 30 minutes
90832	TM	HQ		\$25.00	\$25.78	\$26.58	30 Min	1	Mental Health Psychotherapy, in a group, each 30 minutes
90834	TM			\$65.00		\$67.02	45 Min	1	Individual Mental Health Psychotherapy, 45 minutes with patient
90837	TM			\$72.00		\$74.23	60 Min	1	Individual Mental Health Psychotherapy, 60 minutes with patient
90839	TM					\$89.19	60 Min	1	Individual Mental Health Psychotherapy for crisis, first 60 minutes with patient
90840	TM					\$22.74	Add'l 30 Min	2	Individual Mental Health Psychotherapy for crisis, each additional 30 minutes

The following procedure codes are inactivated effective 8/31/2021 - H0046 TM, T1024 TM and T1027 TM

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<b>PSYCHOLOGICAL TESTING</b>									
CODE	MOD 1	MOD 2	MOD 3	RATE PRIOR TO 12/31/19	RATE EFFECTIVE 1/1/2020	RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
96130	TM					\$142.79	First Hour	1	Psychological testing evaluation services by physician or other QHCP; first hour
96131	TM					\$142.79	Add'l Hour	6	Psychological testing evaluation by qualified health care professional, each additional hour
96132	TM					\$147.22	First hour	1	Neuropsychological testing evaluation services by physician or other QHCP; first hour
96133	TM					\$105.08	Add'l hour	6	Neuropsychological testing evaluation services by physician or other QHCP; each additional hour
96136	TM					\$73.61	First 30 min	1	Psychological or neuropsychological test administration and scoring by physician or other QHCP, two or more tests; any method; first 30 minutes
96137	TM					\$73.61	Add'l 30 min	6	Psychological or neuropsychological test administration and scoring by physician or other QHCP, two or more tests; any method; each addtl 30 minutes
96138	TM					\$71.40	First 30 Min	1	Psychological or neuropsychological test administration and scoring by technician, first 30 minutes
96139	TM					\$71.40	Add'tl 30 Minutes	6	Psychological or neuropsychological test administration and scoring by technician, additional 30 minutes
96146	TM					\$142.79	Eval	1	Psychological or neuropsychological test administration and scoring by single standardized instrument via electronic platform with automated result

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<b>SPECIALIZED TRANSPORTATION</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
T2003	TM					\$2.54	Per Mile	999	Non Emergency, Transportation
Note: Shaded area means the procedure code is new effective 9-1-2021									
Procedure Code A0425 - TM is inactivated effective 8/31/2021									

<b>MEDICAL SERVICES</b>									
CODE	MOD 1	MOD 2	MOD 3	MMIS RATE PRIOR TO 12/31/19	MMIS RATE EFFECTIVE 1/1/2020	MMIS RATE EFFECTIVE 1/1/2021	UNIT	MAX UNITS ALLOWED	DESCRIPTION
90791	TM			\$60.00	\$61.86	\$63.78	Eval	1	Psychiatric Diagnostic Evaluation
Procedure Code 99201 - TM was inactivated effective 12/31/2020									