

FY10 GCCMH Benefit Plan - Adult DD

Adult DD	HCPCS Code	Units of Service Reported	Maximum Allowed based on 12 month plan			
			Level 1	Level 2	Level 3	Level 4
Assessment - Brief Assessment/SA screening	H0002	Encounter	2	2	2	2
Assessment - Mental Health	H0031	Encounter	1	2	2	2
Assessment - Nutrition/Dietary	97802	15 minute	6	6	6	6
Assessment - Health/Nursing	T1001	Encounter	4	8	12	16
Assessment - Psychiatric Evaluation	90801	Encounter	2	2	2	2
Assessment - Psychiatric Evaluation Interactive (<i>not commonly used</i>)	90802	Encounter	1	1	1	1
Assessment - Psychological Testing by psychologist or physician	96101	Per hour	3 (combined)	3 (combined)	3 (combined)	3 (combined)
Developmental Testing, Extended	96111	Per hour				
Developmental Testing, Limited	96110	Per hour				
Assessment - Psychological Testing by neurobehavioral status exam	96116	Per hour				
Assessment - Psychological Testing by neurophychological by psychologist or physician	96118	Per hour				
Behavior Management Review Committee	H2000	Encounter	12	12	12	12
Pharmacologic Management	90862	Encounter	4	6	12	14
Pharmacologic Management - Brief visit (<i>not commonly used</i>)	M0064	Encounter	2	4	6	6
Health Services - Nursing Services RN only	T1002	15 minute	12	48	96	144
Nutrition Therapy - re-assessment	97803	15 minute	6	12	24	48
Nutrition Therapy - group	97804	30 minute	4	4	4	4
Health Services - medication training and support	H0034	15 minute	12	12	12	12
Health Services - patient education non-physician individual	S9445	Encounter	6	6	12	12
Health Services - patient education non-physician group	S9446	Encounter	6	6	12	12
Health Services - nutrition/dietary counseling	S9470	Encounter	1	2	4	6
Medication Administration - medication injection	96372	Encounter	N/A	26	26	26
Medication Administration - medication injection home visit	99506	Encounter	N/A	26	26	26
Therapy (Mental Health) - individual 20-30 min	90804 (use 9080X)	Encounter	8 (combined)	12 (combined)	16 (combined)	24 (combined)
Therapy (Mental Health) - W/E & M 20-30 min (<i>not commonly used</i>)	90805	Encounter				
Therapy (Mental Health) - 45-50 min	90806 (use 9080X)	Encounter				
Therapy (Mental Health) - W/E & M 45-50 min (<i>not commonly used</i>)	90807	Encounter				
Family Psychoeducation - EBP educational workshop with consumer present	S5110	15 minute	32 (combined)	32 (combined)	32 (combined)	32 (combined)
Family Psychoeducation - EBP educational workshop without consumer present	S5110HS	15 minute				
Family Psychoeducation - EBP family joining session with consumer present	T1015	Encounter	6 (combined)	6 (combined)	6 (combined)	6 (combined)
Family Psychoeducation - EBP family joining session without consumer present	T1015HS	Encounter				

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Family Psychoeducation - EBP multi-family group with consumer present	G0177	Encounter	24 (combined)	24 (combined)	24 (combined)	24 (combined)
Family Psychoeducation - EBP multi-family group without consumer present	G0177HS	Encounter				
Targeted Case Management	T1017	15 minute	N/A	N/A	144 (TCM/HSW SC)	192 (TCM/HSW SC)
Supports Coordination	T1016	15 minute	48	96		
Treatment Planning by non-doctor discipline (Mental Health Service Plan)	H0032	Encounter	12	24	36	48
Occupational Therapy - evaluation	97003	Encounter	1	1	1	1
Occupational Therapy - re-evaluation	97004	Encounter	4	6	8	12
Physical Therapy - evaluation	97001	Encounter	1	1	1	1
Physical Therapy - re-evaluation	97002	Encounter	4	6	8	12
OT/PT Services - therapeutic exercises for strength, endurance, ROM & flexibility	97110	15 minute	24 (combined)	48 (combined)	120 (combined)	120 (combined)
OT/PT Services - neuromuscular re-education of movement, balance, coordination, etc.	97112	15 minute				
OT/PT Services - gait training (includes stair climbing)	97116	15 minute				
OT/PT Services - massage, including effleurage, petrissage and/or tapotement	97124	15 minute				
OT/PT Services - manual therapy techniques (mobilization/manipulation, manual lymphatic drainage, manual traction)	97140	15 minute				
OT/PT Services - therapeutic activities, dynamic activities to improve functional performance (direct patient contact)	97530	15 minute				
OT/PT Services - development of cognitive skills to improve attention, memory, problem solving (direct patient contact)	97532	15 minute				
OT/PT Services - sensory integrative techniques to enhance sensory processing & promote adaptive responses to environmental demands (direct patient contact)	97533	15 minute				
OT/PT Services - self care/home mgmt training (eg ADLs) & compensatory training, meal prep, safety procedures & instructions in use of assistive technology/adaptive equipment (direct patient contact)	97535	15 minute				
OT/PT Services - Community/work reintegration training, shopping, transportation, money mgmt, vocational activities &/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment (direct patient contact)	97537	15 minute				
OT/PT Services - wheelchair management (eg assessment, fitting, training)	97542	15 minute				
OT/PT Services - therapeutic procedures, group	97150	15 minute	2	2	4	4
Speech/Language - evaluation	92506	Encounter	1	1	1	1
Speech/Language - evaluation assessment of swallowing function	92610	Encounter	1	1	1	1

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Speech/Language - therapy services individual	92507	Encounter	4 (combined)	6 (combined)	8 (combined)	12 (combined)
Speech/Language - therapy services group	92508	Encounter				
Family support and training	S5111	Encounter	4	12	16	24
Community Living Support - non-specialized residential	H2015	15 minute	UM Review	UM Review	UM Review	UM Review
Skill Building Assistance	H2014	15 minute	UM Review	UM Review	UM Review	UM Review
Out of home non-vocational (HSW only)	H2014HK	15 minute	N/A	N/A	UM Review	UM Review
Out of home pre-vocational (HSW only)	T2015HK	Per Hour	N/A	N/A	UM Review	UM Review
Supported Integrated Employment	H2023	15 minute	UM Review	UM Review	UM Review	UM Review
Peer Directed - peer support specialist services delivered by certified staff	H0038	15 minute	24	24	N/A	N/A
PSR Program Attendance	H2030	15 minute	4000	4000	UM Review	UM Review
Respite	T1005	15 minute	416 (UM Review)	832 (UM Review)	2080 (UM Review)	2080 (UM Review)
Respite - LPN only	T1005TD	15 minute	UM Review	UM Review	UM Review	UM Review
Respite - RN only	T1005TE	15 minute				
Respite - Day out of home care	H0045	Per day	14 (UM Review)	14 (UM Review)	14 (UM Review)	14 (UM Review)
Respite - Day in home care	S5151	Per day				
Transportation	T2002	Encounter	UM Review	UM Review	UM Review	UM Review
Fiscal Intermediary for self-determination	T2025	per month	12	12	12	13
Personal Care in licensed specialized residential setting	T1020	Per day	N/A	UM Review	UM Review	UM Review
	T1020TF					
	T1020TG					
Community Living Supports in licensed specialized residential setting	H2016	Per day	N/A	UM Review	UM Review	UM Review
	H2016TF					
	H2016TG					
Enhanced Medical - durable medical equipment	E1399	Per item	UM Review	UM Review	UM Review	UM Review
Enhanced Medical - assistive technology	S5199	Per item	UM Review	UM Review	UM Review	UM Review
Enhanced Medical - special supplies (e.g. allergy)	T2028	Per item	UM Review	UM Review	UM Review	UM Review
Enhanced Medical - medical equipment NOS	T2029	Per item	UM Review	UM Review	UM Review	UM Review
Enhanced Medical - wheelchair adaptations	T2039	Per item	UM Review	UM Review	UM Review	UM Review
Enhanced Pharmacy - doctor ordered over-the-counter	T1999	Per item	UM Review	UM Review	UM Review	UM Review
Housing Assistance	T2038		UM Review	UM Review	UM Review	UM Review
Chore Services (HSW only)	S5120HK	15 minute	UM Review	UM Review	UM Review	UM Review
Environmental Modifications	S5165	Per Service	UM Review	UM Review	UM Review	UM Review

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Personal Emergency Response System - install/test (HSW only)	S5160HK	Event	UM Review	UM Review	UM Review	UM Review
Personal Emergency Response System - monthly service fee (HSW only)	S5161HK	Per Month	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - home, individual by RN (HSW only)	S9123HK	Per Hour	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - individual by LPN (HSW only)	S9124HK	Per Hour	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - multiple patients by RN (HSW only)	S9123HKTT	Per Hour	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - multiple patients by LPN (HSW only)	S9124HKTT	Per Hour	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - RN independent licensed nursing service (HSW only)	T1000HKTD	15 minute	UM Review	UM Review	UM Review	UM Review
Private Duty Nursing - LPN independent licensed nursing service (HSW only)	T1000HKTE	15 minute	UM Review	UM Review	UM Review	UM Review