

Licensed Clinical Addictions Specialist Fee Schedule

Provider Specialty 129

The inclusion of a rate on this table does not guarantee that a service is covered. Please refer to the Medicaid Billing Guide and the Medicaid and Health Choice Clinical Coverage Policies on the DMA Web site.

Code	Description	Unit	Non-Facility Fee	Facility Fee	Effective Date
90785	Interactive complexity Add-On	per event	\$ 2.97	\$ 2.97	1/1/2013
90791	Psychiatric diagnostic evaluation	per event	\$ 94.04	\$ 73.91	1/1/2013
90832	Psychotherapy, 16-37 minutes	per event	\$ 39.18	\$ 31.04	1/1/2013
90834	Psychotherapy, 38-52 minutes	per event	\$ 50.89	\$ 46.61	1/1/2013
90837	Psychotherapy, 53+ minutes	per event	\$ 74.57	\$ 70.29	1/1/2013
90839	Psychotherapy for crisis, 30-74 minutes	per event	\$ 93.96	\$ 88.07	1/1/2013
90840	Psychotherapy for crisis, each additional 30 minutes beyond initial 74min, up to two add-ons per 90839	per event	\$ 79.10	\$ 73.40	1/1/2013
90846	Family Therapy w/o patient	per event	\$ 54.17	\$ 52.91	7/1/2012
90847	Family Therapy w/patient	per event	\$ 67.28	\$ 63.46	7/1/2012
90849	Group therapy (multi-family)	per event	\$ 20.18	\$ 18.48	7/1/2012
90853	Group therapy (other than of a multi-family group)	per event	\$ 19.18	\$ 18.12	7/1/2012