

VBH-PA HIPAA X_Walk Covered Services Grid				07/24/17																
** Codes interchangeable within the service class				Billed by Provider																
	Service Class	Description	Provider Service Code	Prov Mod 1	Prov Mod 2	Prov Mod 3	PROMiSe Provider Type	PROMiSe Specialty Code	Unit	Form Type (blank = 837P/HCF A)	Auth Type	Level of Service	Type Code	Claim Type	Auth Req?	POS	Dx Class	TPL Exempt	Timely Filing (Date of Service or Date of Discharge)	
Inpatient Psychiatric Services																				
	IPC	Extended Care	0904				01	022	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
	IPA	Acute	0124				01	010	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
								011	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
	IPP	Specialized	0114				01	022	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
								010	per diem	837I/UB	I	I	PG	IG	Y	21	PSY	N	DOD	
								011	per diem	837I/UB	I	I	PG	IG	Y	21	PSY	N	DOD	
	IPW	Extended Acute Care	0120				01	022	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
								010	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
								011	per diem	837I/UB	I	I	PP	IP	Y	21	PSY	N	DOD	
Inpatient Dual Diagnosis																				
	IPD	Other (Dual)	0929				01	010	per diem	837I/UB	I	I	UI	IF	Y	21	PSY, SUB	N	DOD	
								011	per diem	837I/UB	I	I	UI	IF	Y	21	PSY, SUB	N	DOD	
								022	per diem	837I/UB	I	I	UI	IF	Y	21	PSY, SUB	N	DOD	
Inpatient Drug & Alcohol Services																				
	IDD	Acute Detox (4A)	0126				01	837I/UB												
								010	per diem	837I/UB	I	I	D	DT	Y	21	SUB	N	DOD	
								019	per diem	837I/UB	I	I	D	DT	Y	21	SUB	N	DOD	
	IDR	Acute Rehab (4B)	0128				01	441	per diem	837I/UB	I	I	D	DT	Y	21	SUB	N	DOD	
								010	per diem	837I/UB	I	I	SR	RE	Y	21	SUB	N	DOD	
								019	per diem	837I/UB	I	I	SR	RE	Y	21	SUB	N	DOD	
Non-Hospital Drug & Alcohol																				
	NHD	Detox (3A)	H0013				11	132	per diem		R	R	SD	DT	Y	99	SUB	Y	DOD	
	NHS	Short term Rehab (3B)	H0018	HF			11	133	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
		Enhanced Residential	H0018	U4			11	133	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
	NHL	Long term Rehab (3C)	T2048	HF			11	134	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
		Halfway House (2B)	H2034				11	131	per diem		R	R	SA	DA	Y	99	SUB	Y	DOD	
	NHH	Halfway House for Women with Children (2B)	H2034	U3			11	131	per diem		R	R	SA	DA	Y	99	SUB	Y	DOD	
		Short Term Rehab 3.5	H0018	SC			11	133	per diem		R	R	SD	NA	Y	99	SUB	Y	DOD	
	AR3	Long Term Rehab 3.1	T2048	SC			11	134	per diem		R	R	SR	NA	Y	99	SUB	Y	DOD	
	YES	Adolescent Male Rehab YES Program	H0018	U5	U9		11	133	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
	AR2	Non-Hosp Adol Rehab Long Term (3.1)	T2048	UB	U9		11	134	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
	STR	Short Term Rehab (3B) 3.5	H0018	U9			11	133	per diem		R	R	SR	RE	Y	99	SUB	Y	DOD	
Non-Hospital Dual																				
	NHA	Adult Res/Dual	H0018	HE			11	110	per diem		R	R	UD	DD	Y	99	PSY, SUB	Y	DOD	
Residential Treatment Facility																				
	RF1	Transitional RTF JCAHO	0949				01	013	per diem	837I/UB	R	R	D, SR, P	DT, RE, NA	Y	56	PSY	N	DOD	
		JCAHO	0154				01	013	per diem	837I/UB	R	R	D, SR, P	DT, RE, NA	Y	56	PSY	N	DOD	
	RF2	Transitional RTF JCAHO/Reserve Bed Day	0919				01	013	per diem	837I/UB	R	R	D, SR, P	NA	Y	56	PSY	N	DOD	
		JCAHO/Reserve Bed Day	0134				01	013	per diem	837I/UB	R	R	D, SR, P	DT, RE, NA	Y	56	PSY	N	DOD	
	RF3	Non-JCAHO/Comp (R&B)	T2048	U7			56	560	per diem		R	R	P, SA	NA, DA	Y	56	PSY	N	DOD	
	RF4	Non-JCAHO TX Only	H0019	SC			56	560	per diem		R	R	P, SA	NA, DA	Y	56	PSY	N	DOD	
	RF5	Non-JCAHO/Reserve Bed Day Comp (R&B)	T2048	U3			56	560	per diem		R	R	P, SA	NA, DA	Y	56	PSY	N	DOD	
	RF6	Non-JCAHO/Reserve Bed Day Tx Only	H0019	U4			56	560	per diem		R	R	P, SA	NA, DA	Y	56	PSY	N	DOD	

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DAS	Accredited Diversion and Stabilization Unit	0911				01	013	per diem		R	R	D,SR, P	NA	Y	56	PSY	Y	DOD					
LTR	Long Term Structured Residential - Treatment	H0037				11	110	per diem		R	R	P, SA	NA, DA	Y	56	PSY	Y	DOD					
LTB	Long Term Structured Residential - Room & Board	T2048	HE			11	110	per diem		R	R	P, SA	NA	Y	56	PSY	Y	DOD					
RTF	Non hospital residential treatment program	H0018				11	110	per diem		R	P	P	NA	Y	12, 99	PSY	Y	DOD					
Consultations																							
	New Patient/Focused Examination	99201				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	New Patient/Expanded Examination	99202				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Office or Other Outpatient Visit for the	99203				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	New Patient/Comprehensive Examination	99204				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Established Patient/Evaluation	99211				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Established Patient/Focused Examination	99212				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Established Patient/Expanded Examination	99213				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Office or Other Outpatient Visit for the Eval	99214				31	339	per event		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOD					
	Initial Hosp Eval/Low	99221	U1			31	339	30 min		I	I	P, SA	NA	N	21	PSY, SUB	N	DOD					
	Initial Hosp Eval/Mod	99222	U1			31	339	50 min		I	I	P, SA	NA	N	21	PSY, SUB	N	DOD					
	Initial Hosp Eval/High	99223	U1			31	339	70 min		I	I	P, SA	NA	N	21	PSY, SUB	N	DOD					
	Inpt Consult	99251				31	339	20 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Consult	99252				31	339	40 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Consult	99253				31	339	55 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Consult	99254				31	339	80 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Consult	99255				31	339	110 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Fu (15 min)	99231	U1			31	339	15 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Fu (25 min)	99232	U1			31	339	25 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Inpt Fu (35 min)	99233	U1			31	339	35 min		I	I	P, SA	NA, DA	N	21	PSY, SUB	N	DOS					
	Home Visit EM of New Patient, Problem Low	99341				31	339	20 min		I	I	P,SA	NA	N	12	PSY, SUB	N	DOD					
	Home Visit EM of New Patient, Problem Moderate	99342				31	339	30 min		I	I	P,SA	NA	N	12	PSY, SUB	N	DOD					
	Home Visit EM of New Patient, Problem High	99343				31	339	45 min		I	I	P,SA	NA	N	12	PSY, SUB	N	DOD					
	Initial nursing Facility care, per day EM of patient with three key components (low complexity)	99304				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Initial nursing Facility care, per day EM of patient with three key components (moderate complexity)	99305				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Initial nursing Facility care, per day EM of patient with three key components (high complexity)	99306				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Subsequent nursing facility care, per day	99307				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Subsequent nursing facility care, per day low complexity	99308				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Subsequent nursing facility care, per day, moderate complexity	99309				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
	Subsequent nursing facility care, per day, high complexity	99310				31	339	visit		I	I	P,SA	NA	N	31, 32	PSY, SUB	N	DOD					
Inpatient Physicians Services																							
	Initial Hosp Eval/Low	99221				31	339	30 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					
	Initial Hosp Eval/Mod	99222				31	339	50 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					
	Initial Hosp Eval/High	99223				31	339	70 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					
	Sub Hosp (15 min)	99231				31	339	15 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					
	Sub Hosp (25 min)	99232				31	339	25 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					
	Sub Hosp (35 min)	99233				31	339	35 min		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD					

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Outpatient Professional Services	Discharge	99238				31	339	vst		I	I	P, SA	NA, DA	Y	21	PSY, SUB	N	DOD		
TXC	Site Based Autism	H0046	SC			08	340	15 min		O	O	P, SA	NA, DA	Y	12, 99	PSY, SUB	Y	DOS		
						11	340	15 min		O	O	P, SA	NA, DA	Y	12, 99	PSY, SUB	Y	DOS		
	Site Based Autism (Plus)	H0046	HA			08	340	15 min		O	O	P	NA	Y	12, 99	PSY, SUB	Y	DOS		
						11	340	15 min		O	O	P	NA	Y	12, 99	PSY, SUB	Y	DOS		
TI1**	Family Psychotherapy (without the patient present)	90846	U1			31	339	15 min		O	O	P, SA	NA, DA	Y	11	PSY, SUB	Y	DOS		
	Family Psychotherapy (without the patient present)					08	110	15 min		O	O	P, SA	NA, DA	Y	12,49	PSY, SUB	Y	DOS		
	Family Psychotherapy (without the patient present)	90846				19	190	15 min		O	O	P, SA	NA, DA	Y	11	PSY, SUB	Y	DOS		
PSS						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Peer Support Services	H0038				21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Peer Support Services- Group	H0038	U3			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Peer Support Out of County	H0038	U4			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Peer Support/Interactive Telecom Services	H0038	GT			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Forensic Peer Support	H0038	U5			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Forensic Peer Support Group	H0038	U7			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
						08		15 min		O	O	P	NA	N	12, 21, 23, 49, 99	PSY	Y	DOS		
						11		15 min		O	O	P	NA	N	11, 12, 21, 52, 99	PSY	Y	DOS		
	Forensic Peer Support/Interactive Telecommunication system	H0038	U8			21	076	15 min		O	O	P	NA	N	12,21,31,32,99	PSY	Y	DOS		
	Assessment & Assistance																			
		Assess & Assist TSS worker less than 6 months exp.	H2014	HA	U1		31	548	15 min		O	W	P	NA	N	12,99	PSY	Y	DOS	
							19	548	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS	
						08	808	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		

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AAT*	Assess & Assist TSS worker less than 6 months exp.		HA			08	800 or 804	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
						09	548	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
			H2014			11	548, 442, 446, or 450	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
	Assess & Assist TSS worker more than 6 months exp.	H2014	U1			31	548	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
						19	548	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
						08	808	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
	Assess & Assist TSS worker more than 6 months exp.					11	548, 442, 446, or 450	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
						08	800 or 804	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
			H2014			09	548	15 min		O	W	P	NA	N	12, 99	PSY	Y	DOS		
Family Based Services																				
FB1**	Team member w/Consumer	H0004	HE			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team member w/ Family of Consumer	H0004	UK			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team member w/Consumer	H0004	U3	HE		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team member w/Family of Consumer	H0004	U2	UK		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team Member w/Consumer	H0004	UA			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team member w/Family and/or Consumer	H0004	U5	HT		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team Member w/Family	H0004	U6	U4		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team Member w/Family	H0004	HA			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team w/Consumer	H0004	UB	U4		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team Member w/Collateral	T1016	U4			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Enhanced Family Based Team w/Collateral	T1016	U8	U4		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team member w/ Collateral	T1016	UB	UK		11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team w/consumer &/or Family	H0004	HT			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	Team w/ Collateral	T1016	HT			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
	FBC	FAMILY BASED- CRISIS TEAM MEMBER W/ CONSUMER	H0004	ET			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS	
		FAMILY BASED -CRISIS TEAM MEMBER/ FAMILY OF CONSUMER	H0004	TJ			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS	
FAMILY BASED CRISIS TEAM MEMBER W/ COLLATERAL		T1016	HS			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
FAMILY BASED CRISIS TEAM W/CONSUMER &/OR FAMILY		H0004	HR			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
FAMILY BASED CRISIS TEAM W/ COLLATERAL		T1016	TJ			11	115	15 min		O	W	P	NA	Y	12,21,31,32,99	PSY	Y	DOS		
Base Service Unit																				
BSP	BSU Diagnostic Assessment	90791	U7			08	110	per event		O	O	P	NA	N	11,12,99	PSY	Y	DOS		

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	DXA	BSU Diagnostic Assessment	H0031			11	110	15 min		O	O	P	NA	N	99	PSY	Y	DOS		
Plan Assessments	SPA	SCA Service Plan Assessment	H0001	U5		11	184	15 min		O	O	P, SA	NA, DA	N	99	SUB	Y	DOS		
	DAA	Diagnostic Assessment - Level of Care Assessment	H0001			11	184	15 min		O	O	P, SA	NA, DA	N	99	SUB	Y	DOS		
		Diagnostic Assessment-Level of Care Assessment (mobile)	H0001	U4		11	184	15 min		O	O	P, SA	NA	N	99	SUB	Y	DOS		
Medication Mgt.																				
		OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family Co-Occurring	99201	TG		08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family Co-Occurring	99202	TG		08	184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family Co-Occurring	99202	TG		08	110	20 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family Co-Occurring	99203	TG		08	184	20 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family Co-Occurring	99203	TG		08	110	30 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99204	TG		08	184	30 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99204	TG		08	110	45 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99205	TG		08	184	45 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99205	TG		08	110	60 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99205	TG		08	184	60 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family Co-Occurring	99212	TG		08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family Co-Occurring	99212	TG		08	184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family Co-Occurring	99213	TG		08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family Co-Occurring	99213	TG		08	184	15 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99214	TG		08	110	25 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99214	TG		08	184	25 min		O	O	SA	NA	Y	57	SUB	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99215	TG		08	110	40 min		O	O	P	NA	Y	49	PSY	N	DOS		
		OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Co-Occurring	99215	TG		08	184	40 min		O	O	SA	NA	Y	57	SUB	N	DOS		

VBH-PA HIPAA X_Walk Covered Services Grid			07/24/17																	
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	OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family- Buprenorphine Patient Only	99201	U6			08	184	10 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family Buprenorphine Patient Only	99202	U6			08	184	20 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family Buprenorphine Patient Only	99203	U6			08	184	30 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Buprenorphine Patient Only	99204	U6			08	184	45 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Buprenorphine Patient Only	99205	U6			08	184	60 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family Buprenorphine Patient Only	99212	U6			08	184	10 min		O	O	P, SA	NA	Y	57	SBU	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family Buprenorphine Patient Only	99213	U6			08	184	15 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Buprenorphine Patient Only	99214	U6			08	184	25 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Buprenorphine Patient Only	99215	U6			08	184	40 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family (signing psychiatrist)	99201	U5			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family (signing psychiatrist)	99202	U5			08	110	20 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family (signing psychiatrist)	99203	U5			08	110	30 min		O	O	P	NA	Y	49	PSY	N	DOS		

VBH-PA HIPAA X Walk Covered Services Grid							07/24/17														
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RXM	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family (signing psychiatrist)	99204	U5			08	110	45 min		O	O	P	NA	Y	49	PSY	N	DOS			
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family (signing psychiatrist)	99205	U5			08	110	60 min		O	O	P	NA	Y	49	PSY	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family (signing Psychiatrist)	99212	U5			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family (signing Psychiatrist)	99213	U5			08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family (signing Psychiatrist)	99214	U5			08	110	25 min		O	O	P	NA	Y	49	PSY	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family (signing Psychiatrist)	99215	U5			08	110	40 min		O	O	P	NA	Y	49	PSY	N	DOS			
							31	339	10 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
							09	103	10 min		O	O	P	NA	Y	11	PSY	N	DOS		
							08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family	99201	UB				08	184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS		
							31	339	20 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
							09	103	20 min		O	O	P	NA	Y	11	PSY	N	DOS		
							08	110	20 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family	99202	UB				08	184	20 min		O	O	SA	NA	Y	57	SUB	N	DOS		
							31	339	30 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
							09	103	30 min		O	O	P	NA	Y	11	PSY	N	DOS		
							08	110	30 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family	99203	UB				08	184	30 min		O	O	SA	NA	Y	57	SUB	N	DOS		
							31	339	45 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
							09	103	45 min		O	O	P	NA	Y	11	PSY	N	DOS		
						08	110	45 min		O	O	P	NA	Y	49	PSY	N	DOS			
OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99204	UB				08	184	45 min		O	O	SA	NA	Y	57	SUB	N	DOS			

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	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99205	UB			31	339	60 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
09						103	60 min		O	O	P	NA	Y	11	PSY	N	DOS			
08						110	60 min\		O	O	P	NA	Y	49	PSY	N	DOS			
08						184	60 min		O	O	SA	NA	Y	57	SUB	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family	99213	UB			31	339	15 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
09						103	15 min		O	O	P	NA	Y	11	PSY	N	DOS			
08						110	15 min		O	O	P	NA	Y	49	PSY	N	DOS			
08						184	15 min		O	O	SA	NA	Y	57	SUB	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99214	UB			31	339	25 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
09						103	25 min		O	O	P	NA	Y	11	PSY	N	DOS			
08						110	25 min		O	O	P	NA	Y	49	PSY	N	DOS			
08						184	25 min		O	O	SA	NA	Y	57	SUB	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99215	UB			31	339	40 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
09						103	40 min		O	O	P	NA	Y	11	PSY	N	DOS			
08						110	40 min		O	O	P	NA	Y	49	PSY	N	DOS			
08						184	40 min		O	O	SA	NA	Y	57	SUB	N	DOS			
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family	99212	UB			31	339	10 min		O	O	P	NA	Y	11	PSY, SUB	N	DOS		
09						103	10 min		O	O	P	NA	Y	11	PSY	N	DOS			
08						110	10 min		O	O	P	NA	Y	49	PSY	N	DOS			
08						184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS			
	Telepsychiatry OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family	99212	GT			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family	99213	GT			08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	15 min		O	O	SA	NA	Y	57	SUB	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99214	GT			08	110			O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	25 min		O	O	SA	NA	Y	57	SUB	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99215	GT			08	110	40 min		O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	40 min		O	O	SA	NA	Y	57	SUB	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family	99201	GT			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	10 min		O	O	SA	NA	Y	57	SUB	N	DOS		

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	Telepsychiatry OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family	99202	GT			08	110	20 min		O	O	P	NA	Y	49	PSY	N	DOS		
						08	184	20 min		O	O	SA	NA	Y	57	SUB	N	DOS		
						08	110	30 min		O	O	P	NA	Y	49	PSY	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family	99203	GT			08	184	30 min		O	O	SA	NA	Y	57	SUB	N	DOS		
						08	110	45 min		O	O	P	NA	Y	49	PSY	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99204	GT			08	184	45 min		O	O	SA	NA	Y	57	SUB	N	DOS		
						08	110	60 min		O	O	P, SA	NA	Y	49	PSY	N	DOS		
	Telepsychiatry OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99205	GT			08	184	60 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
						08	110	Per Event		O	O	P, SA	NA	Y	49	PSY	N	DOS		
	Office or other OP Visit for the EM of an Established Patient	99211	HE			08	184	per event		O	O	P, SA	NA	Y	57	SUB	N	DOS		
						31	339	15 min		O	O	P, SA	NA	Y	11	PSY, SUB	N	DOS		
						09	103	15 min		O	O	P, SA	NA	Y	11	PSY	N	DOS		
	Office Visit Established Patient (Nurse Medication Management)	99211	UB			08	110	15 min		O	O	P, SA	NA	Y	49	PSY	N	DOS		
						08	184	15 min		O	O	P, SA	NA	Y	57	SUB	N	DOS		
	Telepsychiatry Office Visit Established Patient (Nurse Medication Management)	99211	GT			08	110	15 min		O	O	P, DA	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99203	TU			08	110	30 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99204	TU			08	110	45 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99205	TU			08	110	60 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99213	TU			08	110	10 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99214	TU			08	110	15 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family (Eating disorder/Merck Unit)	99215	TU			08	110	25 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		

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	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family (Eating disorder/Merk Unit)	99212	TU			08	110	40 minutes		O	O	P	NA	Y	49	Psy Sub	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family Forensic	99201	HZ			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family Forensic	99202	HZ			08	110	20 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family Forensic	99203	HZ			08	110	30 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Forensic	99204	HZ			08	110	45 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family Forensic	99205	HZ			08	110	60 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Self Ltd or Minor, face to face w/ patient and/or family Forensic	99212	HZ			08	110	10 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family Forensic	99213	HZ			08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Forensic	99214	HZ			08	110	25 min		O	O	P	NA	Y	49	PSY	N	DOS		
	OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family Forensic	99215	HZ			08	110	40 min		O	O	P	NA	Y	49	PSY	N	DOS		
Evaluation						31	339	per occurrence		O	O	P, SA	NA	Y	11	PSY, SUB	N	DOS		
	Psychiatric diagnostic Evaluation with Medical Services	90792				09	103	per occurrence		O	O	P, SA	NA	Y	11	PSY, SUB	N	DOS		
	Psychiatric diagnostic Evaluation with Medical Services	90792				08	110	per occurrence		O	O	P, SA	NA	Y	12, 49	PSY, SUB	N	DOS		
	Psychiatric diagnostic Evaluation with Medical Services	90792				08	184	per occurrence		O	O	P, SA	NA	Y	12, 57	PSY, SUB	N	DOS		
	Psychiatric Diagnostic Evaluation without Medical Services	90791				08	110	per occurrence		O	O	P, SA	NA	Y	11,12,99	PSY, SUB	N	DOS		
	Psychiatric Diagnostic Evaluation without Medical Services	90791				08	184	per occurrence		O	O	P, SA	NA	Y	12, 57	PSY, SUB	N	DOS		
	Psychiatric Diagnostic Evaluation without Medical Services	90791				19	190	per occurrence		O	O	P, SA	NA	Y	11,12,99	PSY, SUB	N	DOS		
	Telepsych Diagnostic Interview - Therapist	90791	GT			08	110	per occurrence		O	O	P	NA	Y	11,12,99	PSY	N	DOS		
	Telepsych Diagnostic Interview	90791	U1	GT		08	110	per occurrence		O	O	P	NA	Y	11,12,99	PSY	N	DOS		
						19	190	per occurrence		O	O	P	NA	Y	11	PSY	N	DOS		

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EXM**	Psychological Evaluation-Sex Offender Treatment	90791	AJ			11	112	per occurrence		O	O	P	NA	Y	99	PSY	N	DOS		
						11	112	per occurrence		O	O	P	NA	Y	99	PSY	N	DOS		
	Victim Evaluation	90791	ST			19	190	per occurrence		O	O	P	NA	Y	11,12,21,99	PSY	N	DOS		
	MD/DO Diagnostic Evaluation for Buprenorphine patients only	90791	HB			08	184	per occurrence		O	O	SA	NA	Y	12	SUB	N	DOS		
	Diagnostic Interview (Masters Level)	H0031	AJ			11	112	15 min		O	O	P	NA	Y	99	PSY	N	DOS		
	Psychiatric Diagnostic Evaluation without Medical Services (Eating Disorder/Merck Unit)	90791	TU			08	110	per occurrence		O	O	P	NA	Y	49	Psy, Sub	N	DOS		
	Psychiatric diagnostic Evaluation with Medical Services (Eating disorder/Merck Unit)	90792	TU			08	110	per occurrence		O	O	P	NA	Y	49	Psy, Sub	N	DOS		
AOS	Adult Extended Assessment	90792	U7			08	110	per occurrence		O	O	P	NA	Y	12,49	Psy	N	DOS		
EXF	FORENSIC DIAGNOSTIC EVALUATION THERAPIST	90791	HY			08	110	per occurrence		O	O	P	NA	Y	12,49	PSY	N	DOS		
	FORENSIC DIAGNOSTIC EVALUATION MD/DO	90791	HZ			08	110	per occurrence		O	O	P	NA	Y	12,49	PSY	N	DOS		
Therapy																				
							080	visit		O	O	P	NA	Y	12,21,31,32,50,72,99	PSY	N	DOS		
	Clinic Visit/Encounter, All-Inclusive	T1015	HE			08	081	visit		O	O	P	NA	Y	12,21,31,32,50,72,99	PSY	N	DOS		
	Individual Activity Therapy (Music Therapy)	G0176	UB			17	175	1 hour		O	O	P	NA	Y	11	PSY	Y	DOS		
	Group Activity Therapy (Music Therapy)	G0176	U3			17	175	15 min		O	O	P	NA	Y	11	PSY	Y	DOS		
						08	110	30 min		O	O	P	NA	Y	12,49	PSY	N	DOS		
						09	103	30 min		O	O	P	NA	Y	11	PSY	N	DOS		
	Individual Psychotherapy	90832				19	190	30 min		O	O	P	NA	Y	11	PSY	N	DOS		
						19	190	30 min		O	O	P	NA	Y	11	PSY	N	DOS		
	Individual Psychotherapy (Trauma Focused Services)	90832	ST			08	110	30 min		O	O	P	NA	Y	12,49	PSY	N	DOS		
						11	112	30 min		O	O	P	NA	Y	99	PSY	N	DOS		
						08	110	45 min		O	O	P	NA	Y	12,49	PSY	N	DOS		
	Individual Psychotherapy	90834				09	103	45 min		O	O	P	NA	Y	11	PSY	N	DOS		
						19	190	45 min		O	O	P	NA	Y	11	PSY	N	DOS		
						19	190	45 min		O	O	P	NA	Y	11	PSY	N	DOS		
	Individual Psychotherapy (Trauma Focused Services)	90834	ST			08	110	45 MIN		O	O	P	NA	Y	12,49	PSY	N	DOS		
						11	112	45 min		O	O	P	NA	Y	99	PSY	N	DOS		
						08	110	60 min		O	O	P	NA	Y	12,49	PSY	N	DOS		
	Individual Psychotherapy	90837				09	103	60 min		O	O	P	NA	Y	11	PSY	N	DOS		
						19	190	60 min		O	O	P	NA	Y	11	PSY	N	DOS		
						19	190	60 min		O	O	P	NA	Y	11	PSY	N	DOS		
	Individual Psychotherapy (Trauma Focused Services)	90837	ST			08	110	60 min		O	O	P	NA	Y	12,49	PSY	N	DOS		
						11	112	60 min		O	O	P	NA	Y	99	PSY	N	DOS		
	Telepsych Individual Psychotherapy	90832	GT			08	110	30 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS		
	Telepsych Individual Psychotherapy	90834	GT			08	110	45 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS		
	Telepsych Individual Psychotherapy	90837	GT			08	110	60 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS		
	Individual Therapy	90832	U5			08	110	30 min		O	O	P, SA	NA, DA	Y	12,49	PSY	N	DOS		
	Individual Therapy	90834	U5			08	110	45 min		O	O	P, SA	NA, DA	Y	12,49	PSY	N	DOS		
	Individual Therapy	90837	U5			08	110	60 min		O	O	P, SA	NA, DA	Y	12,49	PSY	N	DOS		

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OUT**	Mobile Mental Health Treatment (MMHT) Individual	90832	U4			08	110	30 min		O	O	P, SA	NA	Y	12, 49	PSY	N	DOS	
	Mobile Mental Health Treatment (MMHT) Individual	90834	U4			08	110	45 min		O	O	P, SA	NA	Y	12, 49	PSY	N	DOS	
	Individual Psychotherapy, Interpreter	90832	U3			08	110	30 min		O	O	P, SA	NA, DA	Y	12, 49	PSY	N	DOS	
	Individual Psychotherapy, Interpreter	90834	U3			08	110	45 min		O	O	P, SA	NA, DA	Y	12, 49	PSY	N	DOS	
	Individual Psychotherapy, Interpreter	90837	U3			08	110	60 min		O	O	P, SA	NA, DA	Y	12, 49	PSY	N	DOS	
	Group Psychotherapy, Interpreter	90853	U4	UB			08	110	15 min		O	O	P, SA	NA, DA	Y	49	PSY	N	DOS
	Family Psychotherapy, Interpreter	90847	U4	UB			08	110	15 min		O	O	P, SA	NA, DA	Y	12,49	PSY	N	DOS
	Individual Psychotherapy, Interpreter, not covered by Medicare	90832	GX				08	110	30 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS
	Individual Psychotherapy, Interpreter, not covered by Medicare	90834	GX				08	110	45 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS
	Individual Psychotherapy, Interpreter, not covered by Medicare	90837	GX				08	110	60 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS
	Group Psychotherapy, Interpreter, not covered by Medicare	90853	GX				08	110	15 min		O	O	P, SA	NA	Y	49	PSY	N	DOS
	Family Psychotherapy, Interpreter, not covered by Medicare	90847	GX				08	110	15 min		O	O	P, SA	NA	Y	12,49	PSY	N	DOS
	Individual Therapy MD	90832	U1				31	339	30 min		O	O	P	NA	Y	11	PSY	N	DOS
	Individual Therapy MD	90834	U1				31	339	45 min		O	O	P	NA	Y	11	PSY	N	DOS
	Individual Therapy MD	90837	U1				31	339	60 min		O	O	P	NA	Y	11	PSY	N	DOS
	Individual Psychotherapy (Masters Level)	90832	AJ				11	112	30 min		O	O	P, SA	NA	Y	99	PSY	N	DOS
	Individual Psychotherapy (Masters Level)	90834	AJ				11	112	45 min		O	O	P, SA	NA	Y	99	PSY	N	DOS
	Individual Psychotherapy (Masters Level)	90837	AJ				11	112	60 min		O	O	P, SA	NA	Y	99	PSY	N	DOS
	Group Psychotherapy	90853	U1				31	339	15 min		O	O	P, SA	NA	Y	11	PSY	N	DOS
							08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS
							19	190	15 min		O	O	P	NA	Y	11	PSY	N	DOS
	Group Psychotherapy	90853					09	103	15 min		O	O	P	NA	Y	11	PSY	N	DOS
	Group Therapy (Masters Level)	90853	AJ				11	112	15 min		O	O	P	NA	Y	99	PSY	N	DOS
							19	190	15 min		O	O	P	NA	Y	11	PSY	N	DOS
	Group Psychotherapy (Trauma Focused Services)	90853	ST				08	110	15 min		O	O	P	NA	Y	49	PSY	N	DOS
							11	112	15 min		O	O	P	NA	Y	99	PSY	N	DOS
	Family Psychotherapy	90847	U1				31	339	15 min		O	O	P, SA	NA	Y	11	PSY	N	DOS
							08	110	15 min		O	O	P	NA	Y	11,12,15,49,99	PSY	N	DOS
							19	190	15 min		O	O	P	NA	Y	11	PSY	N	DOS
	Family Psychotherapy	90847					09	103	15 min		O	O	P	NA	Y	11	PSY	N	DOS
	Family Psychotherapy	90847					08	080	15 min		O	O	P	NA	Y	11,12,15,49,99	PSY	N	DOS
	Family Psychotherapy (Masters Level)	90847	AJ				11	112	15 min		O	O	P, SA	NA	Y	99	PSY	N	DOS
						19	190	15 min		O	O	P	NA	Y	11	PSY	N	DOS	
Family Psychotherapy (Trauma Focused Services)	90847	ST				08	110	15 MIN		O	O	P	na	y	11,12,15,49,99	PSY	N	DOS	
						11	112	15 min		O	O	P	NA	Y	99	PSY	N	DOS	
Individual Psychotherapy (Eating disorder/Merck Unit)	90832	TU				08	110	30 min		O	O	P	NA	Y	12, 49	PSY	N	DOS	
Individual Psychotherapy (Eating disorder/Merck Unit)	90834	TU				08	110	45 min		O	O	P	NA	Y	12, 49	PSY	N	DOS	

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	Individual Psychotherapy (Eating disorder/Merck Unit)	90837	TU			08	110	60 min		O	O	P	NA	Y	12, 49	PSY	N	DOS
	Group Psychotherapy (Eating disorder/Merck Unit)	90853	TU			08	110	15 min		O	O	P	NA	Y	12, 49	PSY	N	DOS
	Family Psychotherapy (Eating disorder/Merck Unit)	90847	TU			08	110	15 min		O	O	P	NA	Y	12, 49	PSY	N	DOS
						31	339	30 min		O	O	SA	NA	Y	11	SUB	N	DOS
	DA Individual Psychotherapy	90832	HF			08	184	30 min		O	O	SA	NA	Y	12.57	SUB	N	DOS
						31	339	45 min		O	O	SA	NA	Y	11	SUB	N	DOS
	DA Individual Psychotherapy	90834	HF			08	184	45 min		O	O	SA	NA	Y	12.57	SUB	N	DOS
						31	339	60 min		O	O	SA	NA	Y	11	SUB	N	DOS
	DA Individual Psychotherapy	90837	HF			08	184	60 min		O	O	SA	NA	Y	12.57	SUB	N	DOS
						31	339	15 min		O	O	SA	NA	Y	11	SUB	N	DOS
	DA Group Psychotherapy	90853	HF			08	184	15 min		O	O	SA	NA	Y	12.57	SUB	N	DOS
						31	339	15 min		O	O	SA	NA	Y	11	SUB	N	DOS
	DA Family Psychotherapy	90847	HF			08	184	15 min		O	O	SA	NA	Y	12.57	SUB	N	DOS
	Evaluation Drug & Alcohol Intervention Services	H0022	U5			11	184	Per Event		O	O	SA	NA	Y	99	SUB	Y	DOS
	Drug & Alcohol Intervention Services	H0022	U4			11	184	Per Event		O	O	SA	NA	Y	99	SUB	Y	DOS
	Nurse Coordination with PCP	H0047	U4			11	184	15 min		O	O	SA	NA	Y	12.57	SUB	Y	DOS
						08	110			O	W	P, SA	NA	Y	12, 49	Psy	Y	DOS
	Individual Psychotherapy for Reactive Attachment Disorder (RAD)	90832	HA			11	112			O	W	P, SA	NA	Y	99	Psy	Y	DOS
						19	190			O	W	P, SA	NA	Y	11	Psy	Y	DOS
						31	339	30 mins		O	W	P, SA	NA	Y	11	Psy	Y	DOS
						08	110			O	W	P, SA	NA	Y	12, 49	Psy	Y	DOS
	Individual Psychotherapy for Reactive Attachment Disorder (RAD)	90834	HA			11	112			O	W	P, SA	NA	Y	99	Psy	Y	DOS
						19	190			O	W	P, SA	NA	Y	11	Psy	Y	DOS
						31	339	45 mins		O	W	P, SA	NA	Y	11	Psy	Y	DOS
						08	110			O	W	P, SA	NA	Y	12, 49	Psy	Y	DOS
	Individual Psychotherapy for Reactive Attachment Disorder (RAD)	90837	HA			11	112			O	W	P, SA	NA	Y	99	Psy	Y	DOS
						19	190			O	W	P, SA	NA	Y	11	Psy	Y	DOS
						31	339	60 mins		O	W	P, SA	NA	Y	11	Psy	Y	DOS
						08	110			O	W	P, SA	NA	Y	11, 12, 15, 49, 99	Psy	Y	DOS
	Family Psychotherapy for Reactive Attachment Disorder (RAD)	90847	HA			11	112			O	W	P, SA	NA	Y	99	Psy	Y	DOS
						19	190			O	W	P, SA	NA	Y	11	Psy	Y	DOS
						31	339	15 mins		O	W	P, SA	NA	Y	11	Psy	Y	DOS
	Family Psychotherapy without the patient present for Reactive Attachment Disorder (RAD)	90846	HA			08	110			O	W	P, SA	NA	Y	12, 49	Psy	Y	DOS
						11	112			O	W	P, SA	NA	Y	99	Psy	Y	DOS
						19	190			O	W	P, SA	NA	Y	11	Psy	Y	DOS
						31	339	15 mins		O	W	P, SA	NA	Y	11	Psy	Y	DOS
	Urgent Care Psychiatric Diagnostic Evaluation with Medical Services	90792	U8			08	110	Per Occ		O	O	P	NA	N	49	Psy, Sub	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of New Patient, Problem Self Ltd or Minor, face to face with patient and/or family	99201	U8			08	110	10 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of New Patient, Problem Low to Moderate, face to face w/ patient and/or family	99202	U8			08	110	20 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate, face to face w/ patient and/or family	99203	U8			08	110	30 min		O	O	P	NA	N	49	Psy	N	DOS

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EMC	Urgent Care OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99204	U8			08	110	45 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of New Patient, Problem Moderate to High, face to face w/ patient and/or family	99205	U8			08	110	60 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of Established Patient, Problem Low to Moderate, face to face w/ patient and/or family	99213	U8			08	110	15 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99214	U8			08	110	25 min		O	O	P	NA	N	49	Psy	N	DOS
	Urgent Care OV/OP Visit for Evaluation & Management of Established Patient, Problem Moderate to High, face to face w/ patient and/or family	99215	U8			08	110	40 min		O	O	P	NA	N	49	Psy	n	DOS
DAL	DA OP in an Alternative Setting - Individual	H0047	HA			11	184	15 min		O	O	SA	NA	Y	03, 99	SUB	Y	DOS
	DA OP in an Alternative Setting - Group	H0047	U5			11	184	15 min		O	O	SA	NA	Y	03, 99	SUB	Y	DOS
COT						08	110			O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
	Co-Occurring Individual Therapy	90832	TG			08	184	30 min		O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
						08	110			O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
	Co-Occurring Individual Therapy	90834	TG			08	184	45 min		O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
						08	110			O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
	Co-Occurring Individual Therapy	90837	TG			08	184	60 min		O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
						08	110			O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
	Co-Occurring Group Therapy	90853	TG			08	184	15 min		O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
					08	110			O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS	
	Co-Occurring Family Therapy	90847	TG			08	184	15 min		O	O	P, SA	NA	Y	11,12,15,49,59,99	PSY, SUB	N	DOS
PAS	PASS Program week 1 & 2	H0004	UC			11	112	15 min		O	O	P	NA	Y	99	PSY	Y	DOS
	PASS Program	H0004	AJ			11	112	15 min		O	O	P	NA	Y	99	PSY	Y	DOS
DRS	DA Recovery Specialist	H0047	U6			11	184	15 min		O	O	SA	NA	N	99	SUB	Y	DOS
	DA Recovery Group	H0047	HQ			11	184	15 min		O	O	SA	NA	N	99	SUB	Y	DOS
DCC	DA Case Coordination	H0047	U7			11	184	15 min		O	O	SA	NA	N	99	SUB	Y	DOS
MMH	Mobile Mental Health Diagnostic Interview	90791	HW			08	110	per occurrence		O	O	P	NA	Y	15	PSY	Y	DOS
	Mobile Mental Health Individual Therapy	90832	HW			08	110	30 min		O	O	P	NA	Y	15	PSY	Y	DOS
	Mobile Mental Health Individual Therapy	90834	HW			08	110	45 min		O	O	P	NA	Y	15	PSY	Y	DOS
	Mobile Mental Health Individual Therapy	90837	HW			08	110	60 min		O	O	P	NA	Y	15	PSY	Y	DOS
						08	110	30 min		O	O	P	NA	N	12,49	PSY	N	DOS
	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90832	HR			19	190	30 min		O	O	P	NA	N	11,49	PSY	N	DOS

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PCT	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90834	HR			08	110	45 min		O	O	P	NA	N	12,49	PSY	N	DOS		
	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90837	HR			19	190	60 min		O	O	P	NA	N	11,49	PSY	N	DOS		
	FAMILY THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90847	HR			08	110	15 MIN		O	O	P	NA	N	12,49	PSY	N	DOS		
	GROUP THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90853	HR			19	190	15 MIN		O	O	P	NA	N	11,49	PSY	N	DOS		
	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90832	HR			11	112	30 min		O	O	P	NA	N	99	PSY	N	DOS		
	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90834	HR			11	112	45 min		O	O	P	NA	N	99	PSY	N	DOS		
	INDIVIDUAL THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90837	HR			11	112	60 min		O	O	P	NA	N	99	PSY	N	DOS		
	FAMILY THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90847	HR			11	112	15 MIN		O	O	P	NA	N	99	PSY	N	DOS		
	GROUP THERAPY PARENT-CHILD INTERACTION THERAPY (PCIT)	90853	HR			11	112	15 MIN		O	O	P	NA	N	99	PSY	N	DOS		
	OS1	Alcohol and/or other drug abuse service, not otherwise specified	90847	UB			08	184	15 min		O	O	SA	NA, DA	N	99	SUB	N	DOS	
	MDF	Mobile Drug & Alcohol Family Therapy	H0047	HW			11	184	15 min		O	O	SA	NA	Y	99	SUB	Y	DOS	
	OS2	Alcohol and/or other drug abuse service, not otherwise specified	H0047	U3			11	184	Weekly		O	O	SA	NA, DA	Y	99	SUB	N	DOS	
OPM	Expedited Evaluation - MD (Mobile Adult Outpatient)	90791	HE			08	110	per occurrence		O	O	P	NA	Y	11,15	PSY	Y	DOS		
	Intake Evaluation (Mobile Adult Outpatient)	90791	TS			08	110	per occurrence		O	O	P	NA	Y	11,15	PSY	Y	DOS		
	Individual Therapy (Mobile Adult Outpatient)	90832	HE			08	110	30 min		O	O	P	NA	Y	11,15	PSY	Y	DOS		
	Individual Therapy (Mobile Adult Outpatient)	90834	HE			08	110	45 min		O	O	P	NA	Y	11,15	PSY	Y	DOS		
	Individual Therapy (Mobile Adult Outpatient)	90837	HE			08	110	60 min		O	O	P	NA	Y	11,15	PSY	Y	DOS		
OPF	Forensic Individual Therapy	90832	HZ			08	110	30 min		O	O	P	NA	Y	11, 12, 49, 99	PSY	N	DOS		
	Forensic Individual Therapy	90834	HZ			08	110	45 min		O	O	P	NA	Y	11, 12, 49, 99	PSY	N	DOS		
	Forensic Individual Therapy	90837	HZ			08	110	60 min		O	O	P	NA	Y	11, 12, 49, 99	PSY	N	DOS		
	Forensic Group Therapy	90835	HZ			08	110	15 MIN		O	O	P	NA	Y	11, 12, 49, 99	PSY	N	DOS		
	Forensic Family Therapy	90847	HZ			08	110	15 MIN		O	O	P	NA	Y	11, 12, 49, 99	PSY	N	DOS		
SXE	Psychological Evaluation (Sex Offender Assessment, including Testing & Clinical Interview)	90791	SE			19	190	per occurrence		O	O	P	NA	N	11,12,21,99	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90832	SE			11	112	per occurrence		O	O	P	NA	N	99	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90834	SE			19	190	30 min		O	O	P	NA	N	11	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90834	SE			11	112	30 min		O	O	P	NA	N	99	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90837	SE			19	190	30 min		O	O	P	NA	N	11	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90837	SE			11	112	30 min		O	O	P	NA	N	99	PSY	N	DOS		
	Individual Therapy- Sex Offender Treatment	90837	SE			19	190	60 min		O	O	P	NA	N	11	PSY	N	DOS		
	Group Therapy- Sex Offender	90837	SE			11	112	60 min		O	O	P	NA	N	99	PSY	N	DOS		
Group Therapy- Sex Offender					19	190	15 min		O	O	P	NA	N	11	PSY	N	DOS			

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	Treatment	90853	SE			11	112	15 min		O	O	P	NA	N	99	PSY	N	DOS			
	Family Therapy- Sex Offender Treatment	90847	SE			19	190	15 min		O	O	P	NA	N	11						
	Psych Testing	96101	SE			11	112	15 min		O	O	P	NA	N	99	PSY	N	DOS			
	Psych Testing	96101	SE			19	190	30 min		O	O	P	NA	N	11,12,21,99	PSY	N	DOS			
Clozapine Support																					
	Clozaril Monitor & Eval	H0034	HK			08	110	15 min		O	O	P	NA	Y	11, 12, 22, 50,72, 99, 49	PSY	Y	DOS			
	Clozaril Monitor & Eval by MD/DO	H0034	U1			08	110	15 min		O	O	P	NA	Y	11, 12, 22, 50,72, 99, 49	PSY	Y	DOS			
	Clozapine Support Serv	H2010	U1			31	339	15 min		O	O	P	NA	Y	11, 12, 22, 50,72, 99, 49	PSY	Y	DOS			
	Clozapine Support Serv	H2010	HK			08, 11	110, 113/114	15 min		O	O	P	NA	Y	11, 12, 22, 50,72, 99, 49	PSY	Y	DOS			
	Clozapine Support	H2010	U4			08	110	15 min		P	O	P	NA	Y	52, 99	PSY	Y	DOD			
Testing																					
	Psychological Testing	96101				08	110	30 min		O	O	P	NA	Y	12,49	PSY	N	DOS			
	Psychological Testing	96101	U1			19	190	30 min		O	O	P	NA	Y	11,12,21	PSY	N	DOS			
	Psychological Testing	96101	U1			31	339	30 min		O	O	P	NA	Y	11,21	PSY	N	DOS			
	Psychological Testing	96101				08	110	30 min							12,49						
	Neuropsychological Testing	96118				19	190	30 min		O	O	P	NA	Y	11,12,21	PSY	N	DOS			
	Neuropsychological Testing	96118	U1			31	339	30 min		O	O	P	NA	Y	11, 21	PSY	N	DOS			
Electroconvulsive Therapy																					
	ECT Therapy/single seizure	90870				01	010	1x		O	O	P, SA	NA, DA	Y	22	PSY, SUB	N	DOS			
	ECT Therapy/single seizure	90870				08	110	1tx		O	O	P, SA	NA, DA	Y	49	PSY, SUB	N	DOS			
	ECT Therapy/single seizure/physician services	90870	AM			31	339	1 tx		O	O	P, SA	NA, DA	Y	11,21,99	PSY, SUB	N	DOS			
	ECT/Inpt	0901				01		010 occur	837/UB	I	I	PP	IP	Y	21	PSY	N	DOD			
	ECT/Inpt	0901				01		011 occur	837/UB	I	I	PP	IP	Y	21	PSY	N	DOD			
	ECT/Inpt	0901				01		022 occur	837/UB	I	I	PP	IP	Y	21	PSY	N	DOD			
	Anesthesia	00104	U1			31	339			O	O	P, SA	NA, DA	N	11,21,99	PSY, SUB	N	DOS			
Behavioral Health Rehabilitative Services (BHRS)																					
Physician Wraparound																					
	CCASBE Psychological or Psychiatric Re-Evaluation (child/adolescent)	90791	UC			08	110	per occurrence		O	W	P, SA	NA	Y	11,12,99,	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Re-Evaluation (child/adolescent)	90791	UC			19	190	per occurrence		O	W	P, SA	NA	Y	11,12,21,99	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Re-Evaluation (child/adolescent)	90791	UC			11	113	per occurrence		O	W	P, SA	NA	Y	11,12,99	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Re-Evaluation (child/adolescent)	90791	UC			11	114	per occurrence		O	W	P, SA	NA	Y	11,12,99	PSY	N	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			08	800, 804, or 808	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			19	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			11	548,442, 446,450	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			09	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP	U1		31	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			08	800, 804, or 808	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			
	Community-based Wraparound Services TSS in Home & Community	H2021	EP			19	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS			

VBH-PA HIPAA X_Walk Covered Services Grid							07/24/17													
** Codes interchangeable within the service class							Billed by Provider													
Service Class	Description	Provider Service Code	Prov Mod 1	Prov Mod 2	Prov Mod 3	PROMISE Provider Type	PROMISE Specialty Code	Unit	Form Type (blank = 837P/HCF A)	Auth Type	Level of Service	Type Code	Claim Type	Auth Req?	POS	Dx Class	TPL Exempt	Timely Filing (Date of Service or Date of Discharge)		
	Community-based Wraparound Svcs (TSS), Interpreter	H2021	U5			11	548,442, 446,450	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS		
							09	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS	
YT2	Physician Wraparound-TSS (Authorization purposes only)																			
	Community Based Wrap Around Services TSS in School	H2021	U3			08	800, 804, or 808	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS		
							19	548	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
							11	548,442, 446,450	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
							09	548	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
	Community Based Wrap Around Services TSS-ASD/ABA TSS in School	H2021	U4			08	558	15 min		O	W	P, SA	NA, DA	Y	99	P, SA	Y	DOS		
							11	558	15 min		O	W	P, SA	NA, DA	Y	99	P, SA	Y	DOS	
							19	558	15 min		O	W	P, SA	NA, DA	Y	99	P, SA	Y	DOS	
	TSS-ASD without ABA in Home and Community	H2021	U6			08	800, 804, or 808	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS		
							19	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS	
							11	548,442, 446,450	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS	
							09	548	15 min		O	W	P, SA	NA, DA	Y	12,23,99	PSY	Y	DOS	
	TSS ASD without ABA in School	H2021	U7			08	800, 804, or 808	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS		
							19	548	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
							11	548,442, 446,450	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
							09	548	15 min		O	W	P, SA	NA, DA	Y	99	PSY	Y	DOS	
	AB6	TSS-ASD/ABA - School - Act 62 (Authorization purposes only)																		
	YT4	TSS in School (Authorization purposes only)																		
	YT5	School - Act 62 (Authorization purposes only)																		
	YT6	Home & Community - Act 62 (Authorization purposes only)																		
	AB2	Community Based Wrap Around Services TSS-ASD/ABA TSS in Home and Community	H2021	TG			08	558			O	W	P,SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								11	558			O	W	P,SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS
								19	558			O	W	P,SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS
	AB5	TSS-ASD/ABA - Home/Community - Act 62 (Authorization purposes only)																		
								per occurrence		O	W	P,SA	NA, DA	Y	11,12,99	PSY	Y	DOS		
								per occurrence		O	W	P,SA	NA, DA	Y	11,12,21,99	PSY	Y	DOS		

VBH-PA HIPAA X Walk Covered Services Grid							07/24/17														
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Service Class	Description	Provider Service Code	Prov Mod 1	Prov Mod 2	Prov Mod 3	PROMiSe Provider Type	PROMiSe Specialty Code	Unit	Form Type (blank = 837P/HCF A)	Auth Type	Level of Service	Type Code	Claim Type	Auth Req?	POS	Dx Class	TPL Exempt	Timely Filing (Date of Service or Date of Discharge)			
ITM						11	113	per occurrence		O	W	P, SA	NA, DA	Y	11,12,99	PSY	Y	DOS			
	Interagency Service Planning Team Mtg	98966				11	114	per occurrence		O	W	P, SA	NA, DA	Y	11,12,99	PSY	Y	DOS			
TXS	CCASBE Psychological or Psychiatric Evaluation (Child/Adolescent) (Independent Evaluator)	90791	U4			08	110	per occurrence		O	W	P, SA	NA, DA	Y	11,12,21,99	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Evaluation (Child/Adolescent) (Independent Evaluator)	90791	U4			19	190	per occurrence		O	W	P, SA	NA, DA	Y	11,12,21,99	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Evaluation in the school (Child/Adolescent) Independent Evaluator	90791	AH			19	190	per occurrence		O	W	P, SA	NA, DA	Y	11,12,21,99	PSY	N	DOS			
	CCASBE Psychological or Psychiatric Evaluation (Child/Adolescent) (Independent Evaluator)	90791	U4			08	110	per occurrence		O	W	P, SA	NA, DA	Y	11,12,21,99	PSY	N	DOS			
AEV	CCASBE Addendum to Evaluation	90791	U5			19	190			O	W	P, SA	NA, DA	Y	11,12,99	PSY	N	DOS			
	CCASBE Addendum to Evaluation	90791	U5			08	110	per occurrence		O	W	P, SA	NA, DA	Y	11,12,99	PSY	Y	DOD			
CMP	Summer Therapeutic Activities Program (STAP)	H2015	U4			08	803 or 807, 811	15 min		O	W	P, SA	NA	Y	99	PSY, SUB	Y	DOS			
	11					445,449, or 453	15 min		O	W	P, SA	NA	Y	99	PSY, SUB	Y	DOS				
	Summer Therapeutic Activities Program (STAP)	H2015	HA			08	803 or 807, 811	15 min		O	W	P, SA	NA	Y	99	PSY, SUB	Y	DOS			
	11					445,449, or 453	15 min		O	W	P, SA	NA	Y	99	PSY, SUB	Y	DOS				
MST	MS1	Multi-Systemic Therapy	H2033	U4			08	340	Weekly		O	W	P	NA	N	12,99	PSY	Y	DOS		
							11	340	Weekly		O	W	P	NA	N	12,99	PSY	Y	DOS		
	MS2	Multi-Systemic Therapy	H2033	U5				08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS	
								11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS	
	MS4	Multi-Systemic Therapy	H2033	U3	U9			08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS	
								11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS	
	MS5	Multi-Systemic Therapy	H2033					08	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS	
								11	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS	
	BHRS Services																				
	BS1**	Behavioral Specialist Consultant (Doctoral Level)	H0032	HP	U1			31	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
08								802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,50,99	PSY	Y	DOS		
08								810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS		
19								559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS		
Behavioral Specialist Consultant (Doctoral Level)		H0032	HP					11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,50,99	PSY	Y	DOS	
								08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
Behavioral Specialist Consultant, (Doctoral Level) Interpreter		H0032	U5					19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								31	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
Behavioral Specialist Consultant (Master's Level)		H0032	HO	U1				08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,72,99	PSY	Y	DOS	
								08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
								11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
Behavioral Specialist Consultant (Master's Level)	H0032	HO					09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS		

VBH-PA HIPAA X Walk Covered Services Grid										07/24/17																	
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Service Class	Description	Provider Service Code	Prov Mod 1	Prov Mod 2	Prov Mod 3	PROMiSe Provider Type	PROMiSe Specialty Code	Unit	Form Type (blank = 837P/HCF)	Auth Type	Level of Service	Type Code	Claim Type	Auth Req?	POS	Dx. Class	TPL Exempt	Timely Filing (Date of Service or Date of Discharge)									
ASD	Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD-Doctoral level	H0046	HP			08	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,50,72,99	PSY	Y	DOS									
						19	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						11	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						31	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
	Behavior Specialist Consultant for children with Autism Spectrum Disorder BSC-ASD-Masters Level	H0046	HO			08	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,50,72,99	PSY	Y	DOS									
						19	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						11	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						31	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
AB1	Behavioral Speicalist Consultant ABA (BSC-ABA) Masters Level	H0046	TM			08	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						11	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
	Behavioral Specialist Consultant ABA BSC-ASD Doctoral Level with Applied Behavior Analysis	H0046	AH			19	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						08	558	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
auth purposes only	BSC-ASD/ABA Master's/Doctoral Level - Act 62 (Authorization purposes only)																										
EAC	ExACT (Doctoral Level)	H0032	U7			08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,50,99	PSY	Y	DOS									
						08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
	ExACT (Masters Level)	H0032	U8			09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,72,99	PSY	Y	DOS									
						08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
		11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
		09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
auth place holder	BHRS Services - BSC ACT 62 (authorization purposes only)																										
FBA	Functional Behavioral Assessment (FBA) BSC Doctoral Level	H0032	U4			08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,50,99	PSY	Y	DOS									
						08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
	Functional Behavioral Assessment (FBA) BSC Masters Level	H0032	U6			09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						31	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
						08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,72,99	PSY	Y	DOS									
						08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS									
		19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
		11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
		09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
		31	559	15 min		O	W	P, SA	NA	Y	11,12,23,99	PSY	Y	DOS													
		08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,50,99	PSY	Y	DOS													
		08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													
		19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS													

VBH-PA HIPAA X Walk Covered Services Grid							07/24/17													
** Codes interchangeable within the service class							Billed by Provider													
Service Class	Description	Provider Service Code	Prov Mod 1	Prov Mod 2	Prov Mod 3	PROMiSe Provider Type	PROMiSe Specialty Code	Unit	Form Type (blank = 837P/HCF A)	Auth Type	Level of Service	Type Code	Claim Type	Auth Req?	POS	Dx. Class	TPL Exempt	Timely Filing (Date of Service or Date of Discharge)		
FB4	Functional Behavioral Assessment (FBA) BSC Doctoral Level ASD	H0032	AH			11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS		
						09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS		
	Functional Behavioral Assessment (FBA) BSC Doctoral level ASD	H0032	AH				31	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
							08	802 or 806	15 min		O	W	P, SA	NA, DA	Y	12,23,72,99	PSY	Y	DOS	
							08	810	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99				
							19	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
							11	559,444,448. or 452	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
							09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
	Functional Behavioral Assessment (FBA) BSC Masters Level ASD	H0032	TM				09	559	15 min		O	W	P, SA	NA, DA	Y	11,12,23,99	PSY	Y	DOS	
							31	559	15 min		O	W	P, SA	NA	Y	11,12,23,99	PSY	Y	DOS	
Functional Behavioral Assessment (FBA) BSC Masters level ASD	H0032	TM				08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS		
						11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS		
Comprehensive Community Support Svcs (After School Program)	H2015																			
Mobile BHRS Services																				
MT1**	Therapeutic Behavioral Services MT (Licensed)	H2019	U1			31	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
						08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
						19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
	Therapeutic Behavioral Svcs MT (Licensed)	H2019					11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
	Therapeutic Behavioral Svcs MT, Interpreter	H2019	U5				19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
	Therapeutic Behavioral Svcs MT (Non-licensed)	H2019	U4	U1			31	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
	Therapeutic Behavioral Svcs MT (Non-licensed)	H2019	U4				11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
auth purposes only		MT2	BHRS Services - Mobile Therapy																	DOS
TMT	Targeted/Enhanced Non Licensed Masters Level MT	H2019	HO				08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
							19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS	
						11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		

VBH-PA HIPAA X Walk Covered Services Grid			07/24/17																	
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	Targeted/Enhanced Licensed Masters Level MT	H2019	UB			09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
						08	801,805, or 809	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
						19	549	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
						11	549,443,447, or 451	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
	Targeted/Enhanced Licensed Psychologist Level MT	H2019	UA			09	559	15 min		O	W	P, SA	NA, DA	Y	12,99	PSY	Y	DOS		
ASC	After School Program for Youth with ASD	H2015	SC			08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS		
						11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS		
PEP	Therapeutic Behavioral Services (SBBH-Master's Level Individual Therapy)	H2019	SC			08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS	
						11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS	
	Therapeutic Behavioral Services (SBBH-Master's Level Group Therapy)	H2019	TJ				08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
							11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
	Community-based Wraparound Svcs (SBBH- Bachelor's Level Individual Svcs)	H2021	HA	SC			08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
							11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
	Community Baed Wraparound Svcs (SBBH-Bachelor's Level Group Svcs)	H2021	TJ				08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
							11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
							08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
		School Based Program Individual	H0046	TJ			11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS
						08	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS	
	School Based Program Group	H0046	HQ			11	340	15 min	O	O	P	NA	NA	Y		99	PSY	Y	DOS	
GRC	Group Home R &B	H0019	U3			52	523	per diem		O	W	P, SA	NA	Y	12,99,49	PSY	Y	DOS		
GRT	Tx Services Chd & Adol/Group Home -- -- Host Home Therapeutic Foster Care (TX only)	H0019	U5	HQ		52	523	per diem		O	W	P, SA	NA, DA	Y	12,99,49	PSY	Y	DOS		
PRT**	Licensed Adult Psych Partial Hosp/Adult	H0035				11	114	1 hour		P	O	P	NA	Y	52	PSY	N	DOS		
	Licensed Adult Psych Partial Hosp/Child	H0035	HA			11	114	1 hour		P	O	P	NA	Y	52	PSY	N	DOS		
	Psych Partial/Non-covered Medicare/Adult	H0035	U2			11	114	1 hour		P	O	P	NA	Y	52	PSY	Y	DOS		
	Enhanced School Based Partial Level 1	H0035	U7			11	113	1 hour		P	O	P	NA	Y	52	PSY	Y	DOS		
	Enhanced School Based Partial Level 2	H0035	U8			11	113	1 hour		P	O	P	NA	Y	52	PSY, SUB	Y	DOS		
	Psych Partial/Non-covered Medicare/Child (0-14)	H0035	U4			11	113	1 hour		P	O	P	NA	Y	52	PSY	Y	DOS		
	Licensed Child Psych Partial Hosp/Adult	H0035	HB	UA			11	113	1 hour		P	O	P	NA	Y	52	PSY	N	DOS	
	Licensed Child Psych Partial Hosp/Child	H0035	UB	UA			11	113	1 hour		P	O	P	NA	Y	52	PSY	N	DOS	
	Licensed Child Psych Partial Hosp/Child (15 to 20 yrs)	H0035	UA				11	113	1 hour		P	O	P	NA	Y	52	PSY	N	DOS	
	Adult Acute Partial	H0035	U5				11	114	1 hour		P	P	P	NA	Y	52	PSY	N	DOS	
APH	Adult Acute Partial (Non-covered Medicare)	H0035	U3			11	114	1 hour		P	P	P	NA	Y	52	PSY	Y	DOS		
	Child/Adol Acute Partial (Non-covered Medicare)	H0035	HE			11	113	1 hour		P	P	P	NA	Y	52	PSY	Y	DOS		
NPH	Sleep Over Partial	H0035	HK			11	113	1 hour		P	P	P	NA	Y	52	PSY	N	DOS		
	Acute Partial	H0035	U6			11	113	1 hour		P	P	P	NA	Y	52	PSY	N	DOS		
	Non-Covered Acute Partial	H0035	GX			11	113	1 hour		P	P	P	NA	Y	52	PSY	Y	DOS		

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COO	Acute Partial Hospitalization Co-Occurring	H0035	TG			11	114	1 hour		P	P	NA	Y	52	PSY, SUB	N	DOS			
APD	Adult Acute Partial Hospitalization	H0035	UC			11	114	per hour		P	P	NS	N	52	PSY	N	DOS			
DAP	D & A Partial	H2035				11	129	per hour		P	O	SP	PD	Y	99	SUB	Y	DOS		
	Enhanced D & A Partial	H2035	U4			11	129	per hour		P	O	SP	PD	Y	99	SUB	Y	DOS		
Crisis Intervention																				
claims payment only	CR0	Crisis Block Payment - Not for use by providers	W9700			11	118			O	O	P	NA	N	11, 15	PSY	Y			
		Blended Case Management Block Payment - Not for use by providers	W9701			21	222			O	O	P	NA	N	11, 12, 21, 31, 32, 99	PSY	Y			
claims payment only	CBP	DA Case Management Block Payment- Not for use by provider	W9702			11	184			O	O	S		99	Sub	Y				
	CR1	Telephone Crisis	H0030			11	118	15 min		O	O	P	NA	N	11	PSY	Y	DOS		
	CR2	Child Urgent Response Telephone Crisis	H0030	U4		11	118	15 min		O	O	P	NA	N	11	PSY	Y	DOS		
		Walk-In Crisis	H2011			11	118	15 min		O	O	P	NA	N	11	PSY	Y	DOS		
	CR3	Child Urgent Response Walk In	H2011	U4		11	118	15 min		O	O	P	NA	N	11	PSY	Y	DOS		
		Mobile/Individual Delivered	H2011	HE		11	118	15 min		O	O	P	NA	N	15	PSY	Y	DOS		
		Mobile Crisis Follow-Up	H2011	U7		11	118	15 min		O	O	O	NA	N	15	PSY	Y	DOS		
	CR4	Child Urgent Response Mobile Crisis- Individual	H2011	U5		11	118	15 min		O	O	P	NA	N	15	PSY	Y	DOS		
		Mobile/Team Delivered	H2011	HT		11	118	15 min		O	O	P	NA	N	15	PSY	Y	DOS		
	CR5	Child Urgent Response Mobile Crisis- Team	H2011	U6		11	118	15 min		O	O	P	NA	N	15	PSY	Y	DOS		
	CR6	Crisis In-Home Support	S9484			11	118	per hour		O	O	P	NA	N	12,99	PSY	Y	DOS		
	CR7	Medical Mobile/Team	H2011	HK		11	118	15 min		O	O	P	NA	N	15	PSY	Y	DOS		
		Crisis Residential	S9485			11	118	per diem		O	O	P	NA	N	12	PSY, SUB	Y	DOS		
	CR8	Residential Treatment Facility - Adult (RTFA)	H0019	HB		11	110	per diem		O	O	P	NA	N	99	PSY, SUB	Y	DOS		
		Crisis Residential	S9485	U3		11	118	per diem		O	O	P	NA	Y	12	PSY, SUB	Y	DOS		
Methadone Maintenance																				
	MM1	Methadone Maintenance	H0020	UB		08	084	daily		O	O	SA	DA	Y	57	SUB	Y	DOS		
		Methadone Maintenance	H0020	U3		08	084	daily		O	O	SA	DA	Y	57	SUB	Y	DOS		
		Methadone Maintenance (clinic encounter)	T1015	HG		08	084	weekly		O	O	SA	DA	Y	57	SUB	Y	DOS		
		Methadone Maintenance (clinic encounter)	T1015	U3		08	084	weekly		O	O	SA	DA	Y	57	SUB	Y	DOS		
		METHADONE-RECOVERY INITIATION & STABILIZATION PHASE 1	T1015	U4		08	084	weekly		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-RECOVERY INITIATION & STABILIZATION PHASE 1	H0020	U4		08	084	daily		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-EARLY RECOVERY & REHABILITATION PHASE 2	T2015	U5		08	084	weekly		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-EARLY RECOVERY & REHABILITATION PHASE 2	H0020	U5		08	084	daily		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-RECOVERY MAINTENANCE- PHASE 3	T1015	U6		08	084	weekly		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-RECOVERY MAINTENANCE- PHASE 3	H0020	U6		08	084	daily		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-LONG TERM SUSTAINED RECOVERY- PHASE 4	T1015	U7		08	084	weekly		O	O	SA	NA	Y	57	SUB	Y	DOS		
		METHADONE-LONG TERM SUSTAINED RECOVERY- PHASE 4	H0020	U7		08	084	daily		O	O	SA	NA	Y	57	SUB	Y	DOS		
			Methadone-Women who are pregnant	T1015	TH		08	084	weekly		O	O	SA	NA	Y	57	SUB	Y	DOS	

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	Methadone-Women who are pregnant	H0020	TH			08	084	daily		O	O	SA	NA	Y	57	SUB	Y	DOS		
Other																				
						08	340	per diem		R	R	UD	RE	Y	12	PSY	Y	DOD		
	Adolescent Diversion & Acute Stabilization Unit (Includes Partial Hospitalization Programming)	H0019	HA			11	340	per diem		R	R	UD	RE	Y	12	PSY	Y	DOD		
						52	523	per diem		R	R	UD	RE	Y	12	PSY	Y	DOD		
						08	340	per diem		R	R	UD	RE	Y	12	PSY	Y	DOD		
	Adolescent Diversion & Acute Stabilization Unit (without partial hospitalization)	H0019	U7			11	340	per diem		R	R	UD	RE	Y	12	PSY	Y	DOD		
						52	523	per diem		R	R	UD	RE	Y	99	PSY	Y	DOD		
	IND Intensive outpt D & A	H0015				11	128	15 min		N	O	SA	DA	Y	99	SUB	Y	DOS		
	INP Intensive outpt Psych	H2012	SC			08	110	per hour		N	O	P	NA	Y	49	PSY	Y	DOS		
	SMK Smoking Cessation - Individual therapy	G0437				37	370	15 min		N	O	P, SA	NA	N	11,12,31,32,99	PSY, SUB	N	DOS		
	Smoking Cessation - Group Therapy	G0437	HQ			37	370	15 min		N	O	P, SA	NA	N	11,12,31,32,99	PSY, SUB	N	DOS		
	PRS Psych Rehab-Site Based	H0036				11	123	15 min		O	O	P	NA	Y	15,99	PSY	Y	DOS		
	Transition Site Based Psych Rehab	H0036	U4			11	123	15 min		O	O	P	NA	Y	15,99	PSY	Y	DOS		
	Psych Rehab Site Based Group	H0036	HQ			11	123	15 min		O	O	P	NA	Y	15,99	PSY	Y	DOS		
	Psych Rehab-Mobile	H0036	HB			11	123	15 min		O	O	P	NA	Y	15,99	PSY	Y	DOS		
	Psych Rehab-Mobile Group	H0036	U5			11	123	15 min		O	O	P	NA	Y	15,99	PSY	Y	DOS		
	Psych Rehab-Mobile by ASL Cert. Signing Therapist	H0036	U3			11	123	15 min		O	O	O	NA	Y	15,99	PSY	Y	DOS		
	CLB Psych Rehab Clubhouse	H2030				11	123	15 min		O	O	P	NA	Y	99	PSY	Y	DOS		
	Psych Rehab Clubhouse Group	H2030	HQ			11	123	15 min		O	O	P	NA	Y	99	PSY	Y	DOS		
	CRR Community Res Rehab	H0018	HB			11	110	per diem		O	R	P	NA	Y	99	PSY	Y	DOS		
	CRO Community Residential Services - Other	T2048	U5			52	523	per diem		O	R	P	NA	Y	12	PSY	Y	DOS		
	CTA CTT Assessment	H0039	HK			11	111	Event		O	O	P	NA	N	99	PSY	Y	DOS		
	Community Tx Teams	H0039	HB			11	111	15 min		O	O	P	NA	Y	99	PSY	Y	DOS		
	CTT Assertive Community Tx Team (ACT) Group	H0039	U3			11	111	15 min		O	O	P	NA	Y	99	PSY	Y	DOS		
	Transitions Program	H0046	HE			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS		
	Community Mental Health/Other (Mobile Meds)	H0046	HW			11	119	15 min		O	O	P, SA	NA, DA	Y	99	PSY	Y	DOS		

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	Mobile Meds Travel	H0046	U4			11	119	15 min		O	O	P, SA	NA	Y	99	PSY	Y	DOS			
	Mobile Meds Nurse Extender	H0046	HK			11	119	15 min		O	O	P, SA	NA	Y	99	PSY	Y	DOS			
MMF	Mobile Meds Follow Up	H0046	U5			11	119	15 min		O	O	P, SA	NA	N	99	PSY	Y	DOS			
INS	Interpreter Services All Ages	H0046	UB			11	119	15 min		O	O	P, SA	DA	Y	99	PSY, SUB	Y	DOS			
FFA	Adult Family Focused Solutions Based Services- Individual	H0046	HB			11	119			O	W	P	NA	Y	99	PSY	Y	DOS			
	Adult Family Focused Solutions Based Services- Team	H0046	U6			11	119			O	W	P	NA	Y	99	PSY	Y	DOS			
FDP	Forensic Diversion Program (APA)	H2033	HB			11	119	Weekly		O	O	P, SA	NA	Y	99	PSY, SUB	Y	DOS			
FDE	Forensic Diversion Encounter Data (APA)	H2033	U7			11	119	15 min		O	O	P, SA	NA	N	99	PSY, SUB	Y	DOS			
FFS	Child Family Focused Solutions Based Services- Individual	H0046	U2	U9		08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS			
						11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS			
						08	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS			
FF1	Child Family Focused Solutions Based Services- Team	H0046	U3	U9		11	340	15 min		O	W	P	NA	Y	12,99	PSY	Y	DOS			
						08	340	15 min		O	O	P	NA	Y	12,99	PSY	Y	DOS			
						11	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS			
FF1	Functional Family Therapy	H2019	HA	U9		11	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS			
						08	340	15 min		O	O	P	NA	Y	12,99	PSY	Y	DOS			
FF1	Functional Family Therapy - Collateral	H2019	U6	U9		11	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS			
						08	340	15 min		O	O	P	NA	Y	12,99	PSY	Y (S8)	DOS			
PT1	Project Transitions 24/7 Program	H0046	T1			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS			
PT2	Project Transitions Level 1	H0046	TG			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS			
	Project Transitions Level 2	H0046	HX			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS			
	Project Transitions Level 3	H0046	TS			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS			
DTT	Dual Diagnosis Treatment Team	H0046	HI			11	119	15 min		O	O	P	NA	Y	99	PSY	Y	DOS			
Case Management																					
CM1*	MH/MR Case Management (ICM)	T1017	UB			21	222	15 min		O	O	P	NA	Y	11, 12,99	PSY	Y	DOS			
	MH Services During Psych Inpatient Admission (ICM)	T1017	HK			21	222	15 min		I	O	P	NA	Y	99	PSY	Y	DOS			
	MH Services During Non-Psych Inpatient Admission (ICM)	T1017	HE	HK		21	222	15 min		I	O	P	NA	Y	21,,31,,32	PSY	Y	DOS			
	MH Intensive Case Management Svc.	T1017	UC			21	222	15 min		O	O	P	NA	Y	11, 12,99	PSY	Y	DOS			
CMF	Forensic Case Management	T1017	HZ			21	222	15 min		O	O	P	NA	Y	11, 12,99	PSY	Y	DOS			
TM1	Blended Case Management - Encounter	T1017	UD			21	222	15 min		O	O	P	NA	N	11, 12,99	PSY	Y	DOS			
	TCM Auto-Payment	T1017	U7			21	222	15 min		O	O	P	NA	N	11, 12,99	PSY	Y	DOS			
	Advanced MH-BCM	T1017	HO			21	222	15 min		O	O	P	NA	N	11, 12,99	PSY	Y	DOS			
RC1*	MDFT Case Management	H0047				11	184	15 min		O	O	SA	NA	N	99	SUB	Y	DOS			
	Resource Coordination	T1017	TF			21	221	15 min		O	O	PM	MN	N	11, 12,99	PSY	Y	DOS			
	MH Services During Psych Inpatient Admission (RC)	T1017	TS			21	221	15 min		I	O	PM	MN	N	21	PSY	Y	DOS			
	MH Services During Non-Psych Inpatient Admission (RC)	T1017	ST			21	221	15 min		I	O	PM	MN	N	21,31,32	PSY	Y	DOS			
RC2	Resource Coordination D & A	H0006	TF			21	138	15 min		O	O	SA	DA	N	99	SUB	Y	DOS			
	D & A ICM	H0006				21	138	15 min		O	O	SA	DA	N	99	SUB	Y	DOS			
DCM	D & A ICM	T1017	HF			21	138	15 min		O	O	SA	DA	N	99	SUB	Y	DOS			

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ER2	2nd vst/24 hours	99283				31	339	visit		N/A	N/A	P, SA	NA, DA	N	23	PSY, SUB	N	DOS			
Radiology																					
	Labs					01, 01, 08, 28, 31	010, 019/441, 082, 280, 339			N/A	N/A	P, SA	NA	N	22, 81	PSY, SUB		DOS			
	Labs					01, 01, 08, 28, 31	010, 019/441, 082, 280, 339			N/A	N/A	P, SA	NA	N	22, 81	PSY, SUB		DOS			
Laboratory																					
	Medicare Lab Codes (lab codes beginning with 803 were eliminated for dates of service 01/01/15 forward)	80048 - 89365				01, 01, 08, 28, 31	010, 019/441, 082, 280, 339			N/A	N/A	P, SA	NA	N	22, 81	PSY, SUB		DOS			

Provider Type	Provider Type Description	Provider Specialty	Provider Specialty Description
01	Inpatient Facility	010	Acute Care Hospital
		011	Private Psych Hosp
		013	RTF (JCAHO Certified) Hospital
		018	Extended Acute Psych Inpatient Unit
		019	D&A Rehab Hosp
		022	Private Psych Unit
		183	Hospital Based Medical Clinic
		370	Tobacco Cessation
		441	D&A Rehab Unit
05	Home Health	370	Tobacco Cessation
07	Capitation	072	MCO - BH
08	Clinic	074	Mobile Mental Health Treatment
		076	Peer Specialist
		080	Federally Qualified Health Center
		081	Rural Health Clinic
		082	Independent Medical/Surgical Clinic
		083	Family Planning Clinic
		084	Methadone Maintenance
		110	Psychiatric Outpatient
		184	D&A Outpatient
		340	Program Exception
		370	Tobacco Cessation
		558	Behavior Specialist for Children with Autism
		800	FQHC Therapeutic Staff Support
		801	FQHC Mobile Therapy
		802	FQHC Behavioral Specialist Consultant
		803	FQHC Summer Therapeutic Activity Program
		804	RHC Therapeutic Staff Support
		805	RHC Mobile Therapy
		806	RHC Behavioral Specialist Consultant
		807	RHC Summer Therapeutic Activity Program
		808	Psychiatric Outpatient Therapeutic Staff Support
809	Psychiatric Outpatient Mobile Therapy		
810	Psychiatric Outpatient Behavioral Specialist Consultant		
811	Psychiatric Outpatient Summer Therapeutic Activity Program		
09	CRNP	093	CRNP
		103	Family and Adult Psychiatric Mental Health
		370	Tobacco Cessation
		548	Therapeutic Staff Support
		549	Mobile Therapy
		558	Behavior Specialist for Children with Autism
11	Mental Health/Substance Abuse	076	Peer Specialist
		110	Psychiatric Outpatient

11	Mental Health/Substance Abuse continued	111	Community Mental Health
		112	Outpatient Practitioner - MH
		113	Partial Psych Hosp - Children
		114	Partial Psych Hosp - Adult
		115	Family Based Mental Health
		116	Licensed Clinical Social Worker
		117	Licensed Social Worker
		118	Mental Health Crisis Intervention
		119	MH - OMHSAS
		123	Psychiatric Rehabilitation
		127	D&A Outpatient
		128	D&A Intensive Outpatient
		129	D&A Partial Hospitalization
		131	D&A Halfway House
		132	D&A Medically Monitored Detox
		133	D&A Medically Monitored Residential, Short Term
		134	D&A Medically Monitored Residential, Long Term
		184	Outpatient D&A
		340	Program Exception
		442	Partial Psych Hosp Children Therapeutic Staff Support
		443	Partial Psych Hosp Children Mobile Therapy
		444	Partial Psych Hosp Children Behavioral Specialist Consultant
		445	Partial Psych Hosp Children Summer Therapeutic Activity Program
		446	Partial Psych Hosp Adult Therapeutic Staff Support
		447	Partial Psych Hosp Adult Mobile Therapy
		448	Partial Psych Hosp Adult Behavioral Specialist Consultant
		449	Partial Psych Hosp Adult Summer Therapeutic Activity Program
		450	Family Based MH Therapeutic Staff Support
		451	Family Based MH Mobile Therapy
		452	Family Based MH Behavioral Specialist Consultant
		453	Family Based MH Summer Therapeutic Activity Program
		548	Therapeutic Staff Support
549	Mobile Therapy		
558	Behavior Specialist for Children with Autism		
559	Behavioral Specialist Consultant		
561	Entity BSC-ASD (ABA)		
562	Entity TSS (ABA)		
16	Nurse	162	Psychiatric Nurse
17	Therapist	171	Occupational Therapist
		174	Art Therapist
		175	Music Therapist
19	Psychologist	190	General Psychologist

		370	Tobacco Cessation
19	Psychologist continued	548	Therapeutic Staff Support
		549	Mobile Therapy
		558	Behavior Specialist for Children with Autism
		559	Behavioral Specialist Consultant
		076	Peer Specialist
21	Case Manager	138	D&A Targeted Case Management
		212	MA Case Management for under 21 years of age
		221	MH TCM - Resource Coordination
		222	MH TCM - Intensive
		24	Pharmacy
27	Dentist	370	Tobacco Cessation
28	Laboratory	280	Independent Laboratory
31	Physician	315	Emergency Medicine
		316	Family Practice
		322	Internal Medicine
		339	Psychiatry
		345	Pediatrics
		370	Tobacco Cessation
		548	Therapeutic Staff Support
		549	Mobile Therapy
		558	Behavior Specialist for Children with Autism
		559	Behavioral Specialist Consultant
37	Tobacco Cessation	370	Tobacco Cessation
52	Community Residential Rehab	520	Children & Youth Licensed Group Home with a Mental Health Treatment Component
		523	Host Home/Children
56	Residential Treatment Facility	560	RTF (Non-JCAHO certified)

Highlights are not behavioral health provider type/provider specialty but encounters are permitted to be submitted as defined throughout this document

POS	Place of Service Description	POS	Place of Service Description
03	School	49	Independent Clinic
11	Office	50	Federally Qualified Health Ctr
12	Home	52	Psychiatric Facility - PH
15	Mobile Unit	54	ICF/MR
21	Inpatient Hospital	56	Psychiatric RTF
22	Outpatient Hospital	57	Non-Residential Substance Abuse Treatment Fac
23	Emergency Room - Hospital	65	End-Stage Renal Disease Treatment Facility
24	Ambulatory Surgical Center	72	Rural Health Clinic
31	Skilled Nursing Facility	81	Independent Laboratory
32	Nursing Facility	99	Other POS