
Covered Service Individual Therapy			
Service Code: 5100	Billing Unit Rate:	[per hour]	\$70 – Masters \$85 – PhD \$130 - MD
CPT Codes: 90804 90805 90806 90807 90808 90809			
Service Description: Goal-directed, face-to-face therapeutic intervention (including insight-oriented, behavior modifying, or supportive psychotherapy) with the eligible client which focuses on the mental health/behavioral needs of the client. Psychiatric back-up which offers medication prescribing and monitoring, as well as psychiatric admission privileges, is recommended.			

Covered Service Individual AODA Therapy			
Service Code: 5101	Billing Unit Rate:	[per hour]	\$70 – Masters \$85 – PhD \$130 - MD
CPT Codes:			
Service Description: Individual therapy addressing alcohol and other drug abuse and/or addiction.			

Covered Service Family Therapy			
Service Code: 5110	Billing Unit Rate:	[per hour]	\$70 – Masters \$85 – PhD \$130 - MD
CPT Codes: 90847			
Service Description: Goal-directed, face-to-face therapeutic intervention with a minimum of two family members which may include the client. Services may be in a clinic setting, school, home or community. Psychiatric back-up which offers medication prescribing and monitoring, as well as psychiatric admission privileges, is recommended.			

Covered Service Group Therapy			
Service Code: 5120	Billing Unit Rate:	[per hour]	\$35
CPT Codes: 90853			
Service Description: Goal-directed, face-to-face therapeutic intervention with the eligible client and one or more clients who are treated at the same time which focuses on the mental health/behavioral needs of the clients in the group.			

Covered Service Group AODA Therapy			
Service Code: 5121	Billing Unit Rate:	[per hour]	\$35
CPT Codes:			
Service Description: Group therapy addressing alcohol and other drug abuse and/or addiction.			

Covered Service Special Therapy			
Service Code: 5130	Billing Unit Rate:	[per hour]	\$70 – Masters \$85 – PhD \$130 - MD
CPT Codes:			
Service Description: Non-traditional individual therapies designed to build self-control skills and stabilize behavior.			

Covered Service Specialized Offender Treatment			
Service Code: 5135	Billing Unit Rate:	[monthly]	negotiable
CPT Codes:			
Service Description: Outpatient individual, group and family therapies utilized to address issues related to sexual offenses.			
Covered Service Crisis/Initial Assessment & Planning		INACTIVE CODE	
Service Code: 5140	Billing Unit Rate:	[per hour]	negotiable
CPT Codes:			
Service Description: The initial contact and assessment including referral to other services and resources, as necessary, when further crisis intervention services are not required; or response plan development when crisis intervention services are required. Provided by Mental Health Center of Dane County - Youth Crisis Unit- only			
Covered Service Crisis Assessment and Planning Services			
Service Code: 5145	Billing Unit Rate:	[per hour]	negotiable
CPT Codes:			
Service Description: Intensive, in-home services delivered to stabilize a family situation and provide assessment information needed to effectively prevent crises and eliminate the need for hospital or out-of-home placement, available on a 24-hour a day 7 day/week basis (for a negotiated period of time, typically 30 days). Inclusion of or transition to on-going providers, when necessary, is essential. Psychiatric back-up which offers medication dispensing and monitoring, as well as psychiatric admission privileges, is recommended. Provided by Mental Health Center of Dane County - Youth Crisis Unit- only			
Covered Service Crisis Linkage & Follow-Up Stabilization Services			
Service Code: 5146	Billing Unit Rate:	[per hour]	negotiable
CPT Codes:			
Service Description: Services delivered as a follow-up to 5145, which will enable the family to incorporate the necessary skills and strategies to maintain changes made in the intensive phase. Provided by Mental Health Center of Dane County - Youth Crisis Unit- only			
Covered Service Crisis/Linkage & Follow-up		INACTIVE CODE	
Service Code: 5150	Billing Unit Rate:	[per hour]	negotiable
CPT Codes:			
Service Description: Reviewing and updating the response plan and development, review, and updating of the crisis plan. Resolve or manage family crises to prevent out-of-home placements of children, improve the child's and family's coping skills, and assist the family in using or obtaining ongoing mental health and other supportive services. Follow-up to ensure that intervention plans are carried out and meeting the recipient's needs. Provided by Mental Health Center of Dane County - Youth Crisis Unit- only			
Covered Service In-Home Treatment			
Service Code: 5160	Billing Unit Rate:	[per hour]	\$100/hour
CPT Codes:			
Service Description: Flexible, time limited intensive services provided in the home. In-home services are geared toward families at risk of having a child removed from home and are viewed as one alternative to residential treatment. Services focus on the family as a unit and include: specialized parental skill training, behavior management, family therapy, 24-hour accessibility by the family (as needed), and intensive supervision of staff. Psychiatric back-up which offers medication prescribing and monitoring, as well as psychiatric admission privileges, is recommended.			

Covered Service In-Home Family Assessment			
Service Code: 5161	Billing Unit Rate:	[per hour]	\$100/hour
CPT Code:			
Service Description:			
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Covered Service Family Preservation			
Service Code: 5165	Billing Unit Rate:	[per hour]	negotiable
Service Description:			
Time limited intensive in home service to address issues related to child/family safety issues. In-home service geared toward families at risk of having a child removed from home and is viewed as an alternative to a more restricted placement. Services focus on the family as a unit and include: specialized parental skill training, behavior management, family therapy, 24-hour, 7 day per week accessibility by the family (as needed), and intensive supervision of staff. Psychiatric back-up which offers medication prescribing and monitoring, as well as psychiatric admission privileges, is recommended.			
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Covered Service Day Treatment			
Service Code: 5170	Billing Unit Rate:	[per hour]	\$32.72 average
CPT Codes:			
Service Description:			
Refers to time limited individual and group activities and therapies that are planned and goal-oriented in a structured, comprehensive, individual client treatment plan. Day treatment should include flexible time options, i.e., 8 hour, 4 hour, etc. and flexible treatment options, individual, group, family, etc.			
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Covered Service Day Treatment - AODA			
Service Code: 5171	Billing Unit Rate:	[per hour]	\$32.98 average
CPT Codes:			
Service Description:			
Day treatment addressing alcohol and other drug abuse and/or addiction.			
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Covered Service Transitional Hospital Day Treatment			
Service Code: 5172	Billing Unit Rate:	[per hour]	\$25/hour
CPT Codes:			
Service Description:			
Time limited day treatment provided with goal to transition youth to community programming to include home and school. Youth remains under inpatient status but programming is provided during the day only with return to home or community placement in the evening. A goal directed transition plan should be developed and actively implemented upon placement in the program.			
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Covered Service Day Treatment (Specialized)-Non MA			
Service Code: 5174	Billing Unit Rate:	[per day]	<i>INACTIVE CODE</i> negotiable
CPT Codes:			
Service Description:			
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Covered Service Camp			
Service Code: 5201	Billing Unit Rate:	[total amt]	
CPT Codes:			
Service Description:			
All varieties of camp: special interest and general; residential and day.			
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Covered Service Consultation with Other Professionals

Service Code: 5220 **Billing Unit Rate:** [per hour]
CPT Codes: 99361 99362 99242
90887

Service Description:

Consultation by a specialized clinician concerning specific information necessary to create an individualized treatment plan. Consultation will always involve face to face contact among the consultant, case manager, child/family and/or other treatment team members. Consultation will not be paid for attendance at treatment team meetings for providers who are delivering services to the child and/or family.

Covered Service Behavior Management Services

Service Code: 5240 **Billing Unit Rate:** [per hour] \$70 – Masters
\$85 – PhD
\$130 - MD

CPT Codes:**Service Description:**

Behavioral strategy program provided to teachers, parents, and children by a trained mental health professional designed to insure safety, stabilize crisis and reduce symptoms of mental illness.

Covered Service Crisis Home/Beds

Service Code: 5300 **Billing Unit Rate:** [per day]

CPT Codes:**Service Description:**

A special foster home that accepts children/youth on an emergency basis. Youth are at high risk for hospitalization if a crisis bed placement cannot be utilized. Highly trained foster parents with medical/psychiatric back-up supervise the placement that is expected to be from one to five days.

Covered Service Crisis Residential/Beds

Service Code: 5301 **Billing Unit Rate:** [per day]

CPT Codes:**Service Description:**

A residential program that accepts children/youth on an emergency basis. Youth are at high risk for hospitalization if a crisis bed placement cannot be utilized. Highly trained staff with medical/psychiatric back-up supervise the placement that is expected to be from 3 to 31 days.

Covered Service Crisis Respite (licensed)

Service Code: 5302 **Billing Unit Rate:** [per hour]

CPT Codes:**Service Description:**

Special crisis respite provided at an hourly rate for less than 24 hours.

Covered Service Transition Home (Agency)

Service Code: 5315 **Billing Unit Rate:** [per day]

CPT Codes:**Service Description:**

Intensive, 24-hour/day supervised care delivered for one or more children within a licensed foster care home, designed to transition a child to a less intensive (family, relative or other foster care arrangement) within a 6-month period.

Covered Service Partial Hospitalization**Service Code:** 5330 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Intensive services that provide a multidisciplinary treatment program of less than 24 hours a day as an alternative to hospitalization for a client who needs active psychiatric treatment for acute mental, emotional, or behavioral disorders and who may, after receiving this service, be referred to a lower level of treatment.

Covered Service Evening Hospitalization**Service Code:** 5331 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Placement in a psychiatric hospital setting for evening and overnight programming (generally 12 hours), where all day services, including school, are provided in the community with the goal to transition to home/community.

Covered Service RCC-Residential Care Center**Service Code:** 5340 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Placement facility for youth (usually ages 12 or older) who require more intensive assessment, supervision, behavioral stabilization and/or treatment.

Covered Service Psychiatric Hospitalization**Service Code:** 5350 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Placement in a psychiatric hospital for treatment of acute and/or persistent mental health issues. This may include a short term or long term hospitalization at a private or public hospital.

Covered Service Psychiatric Hospitalization – ER Visit**Service Code:** 5355 **Billing Unit Rate:** [per visit]**CPT Code:****Service Description:**

Covered Service Inpatient AODA Hospitalization**Service Code:** 5360 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Placement in a hospital for treatment of acute and/or persistent alcohol and drug issues. This may include a short term or long term hospitalization at a private or public hospital.

Covered Service Foster Home Care (County)**Service Code:** 5390 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Alternative living situation for children/youth that cannot live with their families. Foster home care provides a home environment with a daily living routine and supervision. The County provides supervision of these homes.

Covered Service Foster Care (Agency)**Service Code:** 5391 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Provides highly intensive and individualized treatment to youth with severe emotional disturbance (SED) in a family home environment. Therapeutic foster parents are likely to be either mental health or special education professionals or individuals so highly skilled in their interventions that they perform a therapeutic function as well as provide child care services. Mental health professionals employed by the foster care agency provide ongoing consultation, support, and training, and respite care is mandatory and planned.

Covered Service Transition Home (County)**Service Code:** 5395 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Intensive, 24-hour supervised care delivered for one or more children within a licensed Dane County foster care home designed to transition a child to a less intensive placement (family, relative or other foster care arrangement) within a 6 month time period.

Covered Service Group Home Care**Service Code:** 5400 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Alternative living situation for children/youth that cannot live with their families and group care is considered to be the best alternate care plan. Group homes usually house up to 8 youth and have transitional staff that provide supervision.

Covered Service Respite Services (licensed)**Service Code:** 5410 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Appropriate temporary care (usually a day, overnight or longer), that is provided to a child with SED from a licensed Dane County provider or an outside agency, in order to provide relief from crises, sustain the family structure and/or to meet the planned needs of the child. Respite care can also be provided on an emergency basis

Covered Service Shelter Care**Service Code:** 5420 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Temporary living situation for children/youth that cannot live with their families and short-term, non-secure care is considered to be the best alternate care plan. Shelter care usually house from 9 to 20 youth and have shift staff that provides 24 hour supervision.

Covered Service Corrections**Service Code:** 5430 **Billing Unit Rate:** [per day]**CPT Codes:****Service Description:**

Locked facility for youth determined to be a "safety risk to the community, in need of restrictive, custodial care" by a juvenile court judge. Length of stay can vary.

Covered Service Psych Eval – Crisis Stabilization			
Service Code: 5504	Billing Unit Rate:	[per hour]	
CPT Codes:			
Service Description:			
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Covered Service Vocational Coach			
Service Code: 5523	Billing Unit Rate:	[per hour]	negotiable
CPT Codes:			
Service Description:			
Counselor with a background in guidance and career advising. Interventions focus on career exploration, college search and planning, organization and study skills.			
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Covered Service Parent Aide/Mentoring			
Service Code: 5525	Billing Unit Rate:	[per hour]	\$22/hour
CPT Codes:			
Service Description:			
Case aide engaged to spend structured time with the enrolled child, typically recreational in nature, whose primary responsibility is to connect the child to other, on-going supports in the child's community; or case aide assigned to work with a parent to assist in developing a positive behavioral structure in the home environment or providing supportive services to the parent.			
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Covered Service Skill Development Group			
Service Code: 5526	Billing Unit Rate:	[per hour]	\$18.50-35/hour
CPT Codes:			
Service Description:			
Structured group activities designed to improve specific skill areas such as social skills, study skills, leadership, self-care, healthy relationships, etc.			
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Covered Service Independent Living Skills Program			
Service Code: 5527	Billing Unit Rate:	[per hour]	\$40/ hour
CPT Codes:			
Service Description:			
Structured group activities designed to teach daily living skills such as money management, employment, cooking, self-care, public transportation, housing, etc. Training normally involves a specific curriculum to promote learning. Group activities may be enhanced through use of individual coaching.			
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Covered Service Parent/Family Skills Training Groups			
Service Code: 5528	Billing Unit Rate:	[per hour]	\$35/hour
CPT Codes:			
Service Description:			
Structured group activities designed to increase the ability of families and children to be successful in the community. Training normally involves a curriculum or defined set of experiences that will promote usable learning. Training may or may not include direct involvement of children in the sessions.			
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Covered Service Family-to-Family Mentoring			
Service Code: 5529	Billing Unit Rate:	[per month]	
CPT Codes:			
Service Description:			
Mentor families are licensed foster homes that provide family skills activities, crisis intervention, and relief care to the mentored family in order to minimize placement in alternate care or assist in successful reunification. Community based service that provides families a supportive partnership with a highly skilled and trained mentor family in the same community.			

Covered Service Community Supervision			
Service Code: 5530	Billing Unit Rate:	[per hour]	\$59.07/hour
CPT Codes:			
Service Description:			
Contact by a trained professional designed to monitor specific behavioral objectives or performance on at least a weekly basis. The service should include specific behavioral objectives, time periods and any crisis capability that are negotiated on a case by case basis. Monitoring of objectives and provision of short term counseling and assistance may vary depending on the client's performance and the level of monitoring required; reports may also vary in frequency. It is anticipated that contact will be less than 20 hours per month. The primary goals of supervision are to ensure the safety of the recipient and others and to build competencies that can reduce the level of crises for the child.			
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Covered Service Intensive Supervision			
Service Code: 5540	Billing Unit Rate:	[per hour]	\$59.07/hour
CPT Codes:			
Service Description:			
A multi-faceted service generally including monitoring of curfew, school attendance and behavior, community behavior and conditions of a court order for a distinct time period by a trained professional. Intensive supervision begins with a specific behavioral contract, negotiated with case manager, parents, client and any other interested parties. Contact with the client shall both monitor these expectations and provide informal counseling or other assistance, either by phone or in person. The service must include a 24-hour/7 day per week crisis response. Regular (at least monthly) written reports and weekly or post crisis verbal reports on progress are made. It is expected that contact of 4 hours or more per week will be required to meet these goals. The primary goals of supervision are to ensure the safety of the recipient and others and to build competencies, which can reduce the level of crises for the child.			
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Covered Service Supported Independent Living			
Service Code: 5550	Billing Unit Rate:	[total amt]	
CPT Codes:			
Service Description:			
Provided supported living environments for youth (ages 17-21), who require community intervention and supervision. Also includes teaching independent living skills.			
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Covered Service Supported Work Environments			
Service Code: 5560	Billing Unit Rate:	[per hour]	\$20/hour
CPT Codes:			
Service Description:			
Provides supportive work environments for youths (generally ages 16-21) that require intervention and support on the job. Services also include career planning and job placement.			
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Covered Service Supported Day Services			
Service Code: 5565	Billing Unit Rate:	[per day]	\$70.50 average
CPT Codes:			
Service Description:			
Provides supported environment for youth who are in need of short-term alternative day programming to stabilize an acute crisis (typically as a result of school suspension). Services require a focus on competency building, supervision and structure.			
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Covered Service Afterschool Program			
Service Code: 5566	Billing Unit Rate:	[per hour]	
CPT Codes:			
Service Description:			
Provides supported environment for youth who are in need of structured activities after school.			

Covered Service Specialized Lessons			
Service Code: 5567	Billing Unit Rate:	[varies]	
<i>CPT Codes:</i>			
Service Description: Specialized instruction in skills such as music, voice, dance, art, etc.			
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Covered Service Transportation			
Service Code: 5570	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Transportation to a designated location.			
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Covered Service Tutor			
Service Code: 5575	Billing Unit Rate:	[per hour]	\$22.50 average
<i>CPT Codes:</i>			
Service Description: Tutor services provided outside of the school setting.			
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Covered Service Discretionary Funds-Incentives			
Service Code: 5580	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Money, purchased item, etc.			
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Covered Service Discretionary Funds-Food			
Service Code: 5581	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Meals, groceries, etc.			
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Covered Service Discretionary Funds-Activities			
Service Code: 5582	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Recreation, outings, etc.			
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Covered Service Discretionary Funds-Housing			
Service Code: 5583	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Rental assistance.			
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Covered Service Discretionary Funds-Utilities			
Service Code: 5584	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Utility assistance.			
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Covered Service Discretionary Funds-Clothing			
Service Code: 5585	Billing Unit Rate:	[total amt]	
<i>CPT Codes:</i>			
Service Description: Clothing, personal care items, etc.			

Covered Service Discretionary Funds-Other

Service Code: 5586

Billing Unit Rate: [total amt]

CPT Codes:

Service Description:

Other discretionary expense not covered above.

Covered Service Discretionary Funds-Translation		
Service Code: 5587	Billing Unit Rate:	[total amt]
<i>CPT Codes:</i>		
Service Description: Translation services.		
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Covered Service Discretionary Funds-Urinalysis (UA)		
Service Code: 5588	Billing Unit Rate:	[total amt]
<i>CPT Codes:</i>		
Service Description: UA screening.		
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Covered Service Discretionary Funds-Household Items		
Service Code: 5589	Billing Unit Rate:	[total amt]
<i>CPT Codes:</i>		
Service Description: Furniture, cleaning supplies, etc.		
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Covered Service Discretionary Funds-Childcare		
Service Code: 5590	Billing Unit Rate:	[total amt]
<i>CPT Codes:</i>		
Service Description: Childcare.		
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Covered Service Discretionary Funds-Respite		
Service Code: 5591	Billing Unit Rate:	[total amt]
<i>CPT Codes:</i>		
Service Description: Respite care.		
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