

SECTION IV Claims and Reimbursement	
3. Reimbursement Rate Table – IPRS Services	
Effective Date: 07/01/2010	Version Date: 07/01/2010
Informational Only 5 Requirement	Reference: G.S. 122/C-146
Requirement Applies to Provider Type:	
Medicaid Basic Svc (Direct Enrolled) 5 Medicaid Basic Svc (Not Direct Enrolled) Medicaid Enhanced Svc 5 Non-Medicaid Contracted Svcs ICF-MR	CAP/MRDD Cat. A Licensed Facilities Cat. B Comm Based Providers Cat. C Institutions/Facilities Cat. D Lic/Cert. Outpatient/Day Svcs

Procedure:

1. Because of our implementation of the Avatar system, the procedure to submit services has changed. Services are only reimbursable when: a) the Provider is contracted to provide the service, b) the appropriate staff (clinician, licensed, certified, or accredited) provides the service, c) the Provider must have received consumer-specific authorization per contract Authorization requirements and d) the Provider has accurately completed required Consumer Enrollment paperwork.
2. Services (now referred to as Treatments) should be billed using the appropriate Procedure Codes through the CareLink system (CPT code, H code, or State Y code). For those providers who do not utilize CareLink, non-Medicaid services are billed on the WCHS Service Billing Form, and are reimbursed at the listed rates. Non-Medicaid services must be billed using the appropriate Procedure Code (first column). Rates are subject to change based on State and Medicaid rate changes and changes in availability of funds. Individualized rates may be negotiated in special circumstances.
3. The Provider is responsible for ensuring that the services meet Medicaid and IPRS definitions.

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
90801	Clinical Intake	CCS-Certified Clinical Supervisor	10/1/2009	\$96.22
		CNP-Certified Nurse Practitioner	10/1/2009	\$109.05
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$96.22
		LCSW, LMFT	10/1/2009	\$96.22
		LPA-Licensed Psychological Associate	10/1/2009	\$96.22
		LP-Licensed Psychologist	10/1/2009	\$128.29
		MD	10/1/2009	\$128.29
90802	Interactive Evaluation	CCS-Certified Clinical Supervisor	10/1/2009	\$102.57

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
		CNP-Certified Nurse Practitioner	10/1/2009	\$116.25
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$102.57
		LCSW, LPC, LMFT	10/1/2009	\$102.57
		LPA-Licensed Psychological Associate	10/1/2009	\$102.57
		LP-Licensed Psychologist	10/1/2009	\$128.29
		MD	10/1/2009	\$136.76
90804	Individual Therapy (20-30 min)	CCS-Certified Clinical Supervisor	10/1/2009	\$42.21
		CNP-Certified Nurse Practitioner	10/1/2009	\$47.84
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$42.21
		LCSW, LPC, LMFT	10/1/2009	\$42.21
		LPA-Licensed Psychological Associate	10/1/2009	\$42.21
		LP-Licensed Psychologist	10/1/2009	\$56.28
		MD	10/1/2009	\$56.28
90805	Individual Therapy (20-30 min) MD	Page 2 MD	10/1/2009	\$67.49
90806	Individual Therapy (45-50 min)	CCS-Certified Clinical Supervisor	10/1/2009	\$59.24
		CNP-Certified Nurse Practitioner	10/1/2009	\$67.13
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$59.24

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
		LCSW, LPC, LMFT	10/1/2009	\$59.24
		LPA-Licensed Psychological Associate	10/1/2009	\$59.24
		LP-Licensed Psychologist	10/1/2009	\$78.98
		MD	10/1/2009	\$78.98
90807	Individual Therapy (45-50min) MD	MD	10/1/2009	\$95.27
90816	Individual Therapy (30 min)	CCS-Certified Clinical Supervisor	10/1/2009	\$44.84
		CNP-Certified Nurse Practitioner	10/1/2009	\$44.58
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$44.84
		LCSW, LPC, LMFT	10/1/2009	\$44.84
		LPA-Licensed Psychological Associate	10/1/2009	\$44.84
		LP-Licensed Psychologist	10/1/2009	\$52.45
		MD	10/1/2009	\$52.45
90817	Individual Therapy (30 min) MD	MD	10/1/2009	\$58.29
90818	Individual Therapy (50 min)	CCS-Certified Clinical Supervisor	10/1/2009	\$58.61
		CNP-Certified Nurse Practitioner	10/1/2009	\$66.42
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$58.61
		LCSW, LPC, LMFT	10/1/2009	\$58.61

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
		LPA-Licensed Psychological Associate	10/1/2009	\$58.61
		LP-Licensed Psychologist	10/1/2009	\$78.14
		MD	10/1/2009	\$78.14
90819	Individual Therapy (50 min) MD	MD	10/1/2009	\$83.90
90846	Family Therapy w/o Client	CCS-Certified Clinical Supervisor	10/1/2009	\$55.28
		CNP-Certified Nurse Practitioner	10/1/2009	\$62.65
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$55.28
		LCSW, LPC, LMFT	10/1/2009	\$55.28
		LPA-Licensed Psychological Associate	10/1/2009	\$55.28
		LP-Licensed Psychologist	10/1/2009	\$73.71
		MD	10/1/2009	\$73.71
90847	Family Therapy w/ Client	CCS-Certified Clinical Supervisor	10/1/2009	\$68.65
		CNP-Certified Nurse Practitioner	10/1/2009	\$77.80
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$68.65
		LCSW, LPC, LMFT	10/1/2009	\$68.65
		LPA-Licensed Psychological Associate	10/1/2009	\$68.65
		LP-Licensed Psychologist	10/1/2009	\$91.53
		MD	10/1/2009	\$91.53

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
90853	Group Therapy	CCS-Certified Clinical Supervisor	10/1/2009	\$19.57
		CNP-Certified Nurse Practitioner	10/1/2009	\$22.18
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$19.57
		LCSW, LPC, LMFT	10/1/2009	\$19.57
		LPA-Licensed Psychological Associate	10/1/2009	\$19.57
		LP-Licensed Psychologist	10/1/2009	\$26.09
		MD	10/1/2009	\$26.09
90862	Medication Check - Individual	MD	10/1/2009	\$50.49
96101	Psychological Testing (per hour)	CCS-Certified Clinical Supervisor	10/1/2009	\$53.54
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$53.54
		LCSW, LPC, LMFT	10/1/2009	\$53.54
		LPA-Licensed Psychological Associate	10/1/2009	\$53.54
		LP-Licensed Psychologist	10/1/2009	\$71.38
		MD Page 5	10/1/2009	\$71.38
96111	Developmental Testing - Extended	CCS-Certified Clinical Supervisor	10/1/2009	\$81.42
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$81.42
		LCSW, LPC, LMFT	10/1/2009	\$81.42

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
		LPA-Licensed Psychological Associate	10/1/2009	\$81.42
		LP-Licensed Psychologist	10/1/2009	\$108.56
		MD	10/1/2009	\$108.56
96372	Medication Administration	MD	10/1/2009	\$17.04
99201	Office Visit New, minor approx 10 min	MD	10/1/2009	\$33.18
99202	Office Visit New, minor approx 20 min	MD	10/1/2009	\$57.54
99203	Office Visit New, minor approx 30 min	MD	10/1/2009	\$83.36
99204	Office Visit New, minor approx 45 min	MD	10/1/2009	\$129.27
99205	Office Visit New, minor approx 60 min	MD	10/1/2009	\$163.41
99212	Office Visit, Establish, minor approx 10 min	MD	10/1/2009	\$33.50
99213	Office Visit, Establish, minor approx 15 min	MD	10/1/2009	\$55.94
99214	Office Visit, Establish, minor approx 25 min	MD	10/1/2009	\$84.29
99215	Office Visit, Establish, minor approx 40 min	MD	10/1/2009	\$114.00
H0001	Alcohol and/or Substance Abuse Assessment	AGENCY	10/1/2009	\$14.15
		CCS-Certified Clinical Supervisor	10/1/2009	\$20.21
		CNP-Certified Nurse Practitioner	10/1/2009	\$20.21
		Page 6		
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$20.21
		LCSW, LPC, LMFT	10/1/2009	\$20.21
		LPA-Licensed Psychological Associate	10/1/2009	\$20.21
		LP-Licensed Psychologist	10/1/2009	\$20.21

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
		MD	10/1/2009	\$20.21
H0004	Behavioral Health Counseling and Therapy	AGENCY or Direct Enrolled Clinician	10/1/2009	\$20.21
H0004:HQ	DMH Outpatient Treatment Group	AGENCY or Direct Enrolled Clinician	10/1/2009	\$7.45
H0004:HR	DMH Outpat Tx Family Therapy w/ Client	AGENCY or Direct Enrolled Clinician	10/1/2009	\$20.21
H0004:HS	DMH Outpat Tx Family Therapy w/o Client	AGENCY or Direct Enrolled Clinician	10/1/2009	\$20.21
H0005	SA Services - Group Therapy	AGENCY	10/1/2009	\$5.22
		CCS-Certified Clinical Supervisor	10/1/2009	\$7.45
		CNP-Certified Nurse Practitioner	10/1/2009	\$7.45
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$7.45
		LCSW, LPC, LMFT	10/1/2009	\$7.45
		LPA-Licensed Psychological Associate	10/1/2009	\$7.45
		LP-Licensed Psychologist	10/1/2009	\$7.45
		MD	10/1/2009	\$7.45
H0015	SA Intensive Outpatient Program	SAIOP Page 7	10/1/2009	\$134.24
H0019:F3	Behavioral Health L T Res (L 3 <5 bed)	AGENCY	10/1/2009	\$237.63
H0019:F4	Behavioral Health L T Res (L 4 <5 bed)	AGENCY	10/1/2009	\$322.15
H0019:G3	Behavioral Health L T Res (L 3 5+ bed)	CMHRES	10/1/2009	\$193.62

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
H0019:G4	Behavioral Health L T Res (L 4 5+ bed)	CMHRES	10/1/2009	\$322.15
H0031	Mental Health Assessment	AGENCY	10/1/2009	\$14.15
		CCS-Certified Clinical Supervisor	10/1/2009	\$20.21
		CNP-Certified Nurse Practitioner	10/1/2009	\$20.21
		LCAS-Licensed Clinical Addictions Spec	10/1/2009	\$20.21
		LCSW, LPC, LMFT	10/1/2009	\$20.21
		LPA-Licensed Psychological Associate	10/1/2009	\$20.21
		LP-Licensed Psychologist	10/1/2009	\$20.21
		MD	10/1/2009	\$20.21
H0035:HA	Partial Hospitalization MH Tx Child min 3 hrs	PH	10/1/2009	\$135.02
H0035HB	Partial Hospitalization MH Tx Adult min 3 hrs	PH	10/1/2009	\$135.02
H0036:HA	Community Support Child	CS QP-Licensed	10/1/2009	\$19.92
		Page 8 CS QP-Not Licensed	10/1/2009	\$16.50
H0036:HB	Community Support Adult	CS QP-Licensed	10/1/2009	\$19.92
		CS QP-Not Licensed	10/1/2009	\$16.50

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
H0036:HQ	Community Support Group	CS QP-Licensed	10/1/2009	\$6.41
		CS QP-Not Licensed	10/1/2009	\$5.31
H 0040	Assertive Community Treatment Team	ACTT	7/1/2009	\$301.35
H0046	Residential level 1	AGENCY	10/1/2009	\$50.77
H2011	Mobile Crisis Management (per 15 min)	MC	7/1/2009	\$34.37
H2012:HA	Day Tx Behavior Health - Child	DAYTX	10/1/2009	\$31.41
H2014	Developmental Therapies-Prof. Indiv	AGENCY	7/1/2009	\$13.75
H2014:HM	Developmental Therapies-Paraprof Indiv	AGENCY	7/1/2009	\$6.01
H2014:HQ	Developmental Therapies-Profes. Group	AGENCY	7/1/2009	\$5.00
H2014:U1	Developmental Therapies-Paraprof Group	AGENCY	7/1/2009	\$2.01
H2015:HT	Community Support Team	CST	10/1/2009	\$15.60
			7/1/2010	\$14.50
H2017	Psychosocial Rehabilitation	PSR	10/1/2009	\$2.74
H2020	Therapeutic Behavioral Service Level 2	AGENCY	10/1/2009	\$128.89
H2022	Intensive In-Home	IIH	7/1/2009	\$258.20
H2033	Multi-Systemic Therapy	MSP	7/1/2009	\$37.32
H2034	SA Halfway House	AGENCY	7/1/2009	\$55.29
H2035	SA Comprehensive Outpatient Treatment	SACOT	10/1/2009	\$46.28
NOTIFY	NOTIFICATION OF REFERRAL	Not Applicable	7/1/2009	\$0.00
S5145	Foster Care Therapeutic Child Level 2	AGENCY	10/1/2009	\$90.39
T101 7:HI	Targeted Case Management-DD IPRS ONLY	AGENCY	10/1/2009	\$17.67

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
TRANSFER	PROVIDER TRANSFER	Any	7/1/2009	\$0.00
YA125	Hourly Respite - CTSP Only	AGENCY	7/1/2009	\$5.00
YA230	Psychiatric Resid. Treatment Facility	AGENCY	7/1/2009	\$465.01
YA232	Room & Board Level III (1-4 beds)	AGENCY	7/1/2009	\$20.10
YA233	Room & Board Level III (5+ beds)	AGENCY	7/1/2009	\$20.10
YA234	Room & Board Level II (Age 5 or <)	AGENCY	7/1/2009	\$13.00
YA235	Room & Board Level II (Age 6-12)	AGENCY	7/1/2009	\$14.66
YA236	Room & Board Level II (Age 13 or >)	AGENCY	7/1/2009	\$16.33
YA237	Room & Board Level IV (1-4 beds)	AGENCY	7/1/2009	\$20.10
YA238	Room & Board Level V (5+ beds)	AGENCY	7/1/2009	\$20.10
YA254	Ther. Leave Resid Level II - Ther Hme	AGENCY	7/1/2009	\$95.40
YA255	Ther Leave Resid Level II - Group home	AGENCY	7/1/2009	\$136.04
YA256	Ther Leave Resid Level III- (1-4 beds)	AGENCY	10/1/2009	\$237.63
YA257	Ther. Leave Resid Level III- (5+ Beds)	AGENCY	10/1/2009	\$193.62
YA258	Ther Leave Resid Level IV- (1-4 beds)	AGENCY	10/1/2009	\$322.15
YA259	Ther. Leave Resid Level IV- (5+ Beds)	AGENCY	10/1/2009	\$322.15
YA341	Assertive Engagement	AGENCY	7/1/2009	\$15.00
YA370	Specialized Summer Program	AGENCY	7/1/2009	\$3.58
YM050	Personal Care	AGENCY	7/1/2009	\$3.36
YM645	Long-term Vocational Supports	Page 10 AGENCY	7/1/2009	\$11.21
YM686	Guardianship	AGENCY	7/1/2009	Client Specific
YM700	Benefits Eligibility Screening	Any	7/1/2009	\$5.00
YM811:TA	Sup. Living 1 Res Level A Therap. Leave	AGENCY	7/1/2009	\$330.00
YM811:TB	Sup. Living 1 Res Level B Therap. Leave	AGENCY	7/1/2009	\$370.00
YM811:TC	Sup. Living 1 Res Level C Therap. Leave	AGENCY	7/1/2009	\$380.00

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
YM811:UA	Sup Living 1 Res Level A	AGENCY	7/1/2009	\$330.00
YM811:UB	Sup Living1 Res Level B	AGENCY	7/1/2009	\$370.00
YM811:UC	Sup Living 1 Res Level C	AGENCY	7/1/2009	\$380.00
YM812	Supervised Living 2 Resident	AGENCY	7/1/2009	\$161.99
YM812:TL	Superv. Living 2 Res Therap. Leave	AGENCY	7/1/2009	\$161.99
YM813	Supervised Living 3 Resident	AGENCY	7/1/2009	\$116.15
YM813:TL	Superv. Living 3 Res Therap Leave	AGENCY	7/1/2009	\$116.15
YM814	Supervised Living 4 Resident	AGENCY	7/1/2009	\$93.17
YM814:TL	Superv. Living 4 Resident Therap Leave	AGENCY	7/1/2009	\$93.17
YM815	Supervised Living 5 Residents	AGENCY	7/1/2009	\$77.67
YM816	Supervised Living 6 Residents	AGENCY	7/1/2009	\$68.83
YP010	Hourly Respite - Individual	AGENCY	7/1/2009	\$5.00
YP011	Hourly Respite - Group	AGENCY	7/1/2009	\$1.67
YP020	Personal Assist - Individual	AGENCY	7/1/2009	\$4.46
YP485	Facility Based Crisis NonMedicaid	AGENCY	7/1/2009	\$251.67
YP610	Developmental Day (inc. Before/After)	AGENCY	7/1/2009	\$2.50
YP620	ADAP/ADVP	AGENCY	7/1/2009	\$1.25
YP630	Supported Employment - Individual	AGENCY	7/1/2009	\$11.21
YP640	Supported Employment - Group	AGENCY	7/1/2009	\$2.53
YP660	Day Activity	AGENCY	7/1/2009	\$3.75
YP692	Drop In Center Coverage	AGENCY	7/1/2009	\$187.24
YP710	Supervised Living - Low	AGENCY	7/1/2009	\$28.92
YP710:TL	Supervised Living - Low Ther Leave	AGENCY	7/1/2009	\$28.92
YP720	Supervised Living - Moderate	AGENCY	7/1/2009	\$55.11
YP720:U1	Intensive Supervised Living	AGENCY	7/1/2009	\$180.23
YP720:TL	Intensive Supervised Living- Ther Leave	AGENCY	7/1/2009	\$180.23
YP730	Community Respite	AGENCY	7/1/2009	\$214.38
YP740	Family Living - Low	AGENCY	7/1/2009	\$50.00
YP750	Family Lining - Moderate	AGENCY	7/1/2009	\$52.03
YP760	Group Living - Low	AGENCY	7/1/2009	\$55.29
YP760:TL	Group Living - Low Ther Leave	AGENCY	7/1/2009	\$55.29
YP770:TA	Group Living - Mod A Ther Leave	AGENCY	7/1/2009	\$70.95
YP770:TB	Group Living - Mod B Ther Leave	AGENCY	7/1/2009	\$75.48
YP770:UA	Group Living - Mod A	AGENCY	7/1/2009	\$70.95

PROCEDURE CODE	CPT CODE DESCRIPTION	DISCIPLINE VALUE	EFFECTIVE DATE	RATE
YP770:UB	Group Living - Mod B	AGENCY	7/1/2009	\$75.48
YP780	Group Living - Hi	AGENCY	7/1/2009	\$141.51
YP780:TL	Group Living - Hi Ther Leave	AGENCY	7/1/2009	\$141.51
YP820	Inpatient Hospital	AGENCY	1/6/2010	\$646.88
YP830	SA Assessment non-lic SA prof	AGENCY	10/1/2009	\$14.15
YP831	Behav Health Indiv Coun non-lic SA prof	AGENCY	10/1/2009	\$20.21
YP832	Behav Health Gp Therapy non-lic SA prof	AGENCY	10/1/2009	\$7.45
YP833	Family Therapy w/ Client non-lic SA prof	AGENCY	10/1/2009	\$20.21
YP834	Family Therapy w/o Client non-lic SA prof	AGENCY	10/1/2009	\$20.21
YP835	SA Gp Counseling non-lic SA prof	AGENCY	10/1/2009	\$5.22
YP851	Public Psychiatry - Administration	AGENCY	7/1/2009	\$25.00
YP852	Public Psychiatry-Consult/Service	AGENCY	7/1/2009	\$35.00

Avatar Service Groupings

1/15/2010

These groupings are set up to coincide with the Benefit Plans (80% of max. units), utilizing the most commonly billed Procedure codes. Individual Procedure Codes can be requested instead of these groupings, individualized to the consumer's needs.

	Behav Health Indiv Counseling	Behav Health Grp Other	Medication Check	Behav Health Family w/client		
Procedure Code	H0004	H004:HQ	90862	H004:HR		
Rate	\$ 20.21	\$ 7.45	\$ 50.49	\$ 20.21		
Procedure Grp	Units	Units	Units	Units	Time Period	Max Cost
AMH BHO Initial Phase-Indiv	42		3		3 mo/90 days	\$ 1,000.29
AMH BHO Initial Phase-Grp Svcs		42	3		3 mo/90 days	\$ 464.37
AMH BHO Initial Phase-Ind_Grp	8	34	3		3 mo/90 days	\$ 566.45
AMH BHO Active Phase-Indiv	28		2		3 mo/90 days	\$ 666.86
AMH BHO Active Phase-Grp Svcs		28	2		3 mo/90 days	\$ 309.58
AMH BHO Active Phase-Ind_Grp	4	22	2		3 mo/90 days	\$ 345.72
AMH BHO Transitional Phase-Indiv	12		1		3 mo/90 days	\$ 293.01
AMH BHO Transitional Phase-Grp		12	1		3 mo/90 days	\$ 139.89
AMH BHO Maintenance Phase	8		2		3 mo/90 days	\$ 262.66
DBT Phase 1	52	104	4		3 mo/90 days	\$ 2,027.68
DBT Phase 2	52	104	4		3 mo/90 days	\$ 2,027.68
ASA BHO Initial Phase-Indiv	112		3		3 mo/90 days	\$ 2,414.99
ASA BHO Initial Phase-Grp Svcs		112	3		3 mo/90 days	\$ 985.87
ASA BHO Initial Phase-Ind_Grp	12	100	3		3 mo/90 days	\$ 1,138.99
ASA BHO Active Phase-Indiv	36		2		3 mo/90 days	\$ 828.54
ASA BHO Active Phase-Grp Svcs		36	2		3 mo/90 days	\$ 369.18
ASA BHO Active Phase-Ind_Grp	6	30	2		3 mo/90 days	\$ 445.74
ASA BHO Maintenance Phase-Ind	12		1		3 mo/90 days	\$ 293.01
ASA BHO Maintenance Phase-Grp		12	1		3 mo/90 days	\$ 139.89

Procedure Grp	Units	Units	Units	Units	Time Period	Max Cost
Opioid Tx_Meth Maint Phase 1	48	76	2		3 mo/90 days	\$ 1,637.26
Opioid Tx_Meth Maint Phase 2	22	76	2		3 mo/90 days	\$ 1,111.80
Opioid Tx_Meth Maint Phase 3	48	95	1		6 mo/180 days	\$ 1,728.32
Opioid Tx_Meth Maint Phase 4	24	59	1		6 mo/180 days	\$ 975.08
Opioid Tx_Meth Maint Phase 5	24	59	1		6 mo/180 days	\$ 975.08
Opioid Tx_Meth Maint Phase 6	48				12 mo/365 days	\$ 970.08
CMHSA BHO Initial Phase	12			36	3 mo/90 days	\$ 970.08
CMHSA BHO Active Phase	12			36	3 mo/90 days	\$ 970.08
CMHSA BHO Maintenance Phase	12			12	3 mo/90 days	\$ 485.04
CMHSA BHO StepDown Phase	4			8	3 mo/90 days	\$ 242.52
CSA Juv Court BHO Initial Phase	12	72		36	3 mo/90 days	\$ 1,506.48
CSA Juv Court BHO Active Phase	6			6	3 mo/90 days	\$ 242.52
CSA Juv Court BHO Maintenance Phase	6			6	3 mo/90 days	\$ 242.52