



IDAHO DEPARTMENT OF HEALTH & WELFARE

School Based Services Codes – Idaho Medicaid

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Procedure Code	Modifier	Description	Unit	Allowed Amount
90791		Psychiatric Diagnostic Evaluation	15 min	\$36.34
90832		Psychotherapy, 30 minutes with patient and /or family member; do not report psychotherapy of less than 16 minutes duration.	1 visit	\$68.96
90834		Psychotherapy, 45 minutes with patient and /or family member.	1 visit	\$91.03
90837		Psychotherapy, 60 minutes with patient and /or family member.	1 visit	\$134.77
90846		Family psychotherapy without patient present. Must be face-to-face with at least one family member present. The member must be the focus of services. Professional only. Goals of treatment must be specified on the members individualized treatment plan	15 min	\$21.72
90847		Family Psychotherapy by School District with patient present	15 min	\$22.65
90853		Group Psychotherapy by School District	15 min	\$6.12
92507	HM	Individual Speech/Hearing Therapy – Assistant by School District	15 min	\$13.69
92507*	HO	Individual Speech/Hearing Therapy – Professional by School District	15 min	\$16.10
92508		Group Speech/Hearing Therapy –Assistant by School District	15 min	\$3.42
92508	HO	Group Speech/Hearing Therapy – Professional by School District	15 min	\$4.03
92521		Evaluation of speech fluency (eg, stuttering, cluttering)	1 Assessment	\$112.14
92522		Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria)	1 Assessment	\$93.18

92523		Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria; with evaluation of language comprehension and expression, eg, receptive and expressive language)	1 Assessment	\$191.64
92523	UC	Evaluation of Language Comprehension and Expression (EG, Receptive and Expressive Language) Alone without Evaluation of Speech Sound Production - Abbreviated Service	1 Assessment	\$95.82
92524		Behavioral and qualitative analysis of voice and resonance	1 Assessment	\$91.72
96125		Standardized Cognitive Performance Testing both face to face administering tests to the patient and time interpreting the test results and preparing the report. (This a Speech and Language test)	60 min	\$85.32
96130		Psychological Testing Evaluation services by School District – Physician/Psychologist - First Hour Only	60 min	\$101.12
96131		Psychological Testing Evaluation services by School District – Physician/Psychologist - Each Additional Hour to 96130	60 min	\$72.40
96136		Psychological Test Administration and Scoring by School District – Physician/Psychologist - First 30 Minutes Only	30 min	\$34.39
96137		Psychological Test Administration and Scoring by School District – Physician/Psychologist - Each Additional 30 Minutes to 96136	30 min	\$30.45
96138		Psychological Test Administration and Scoring by School District - Technician - First 30 Minutes Only	30 min	\$27.36
96139		Psychological Test Administration and Scoring by School District - Technician - Each Additional 30 Minutes to 96138	30 min	\$27.36
96146		Psychological Test Administration and Scoring by School District – Standardized Instrument via Electronic Platform	1 test	\$1.72
H0032	HN	Behavioral Assessment – Interventional Specialist	15 min	\$16.12
H0032	HO	Behavioral Assessment - Interventional Professional	15 min	\$22.23
H0032	TF	Behavioral Assessment – EBM Interventional Specialist	15 min	\$18.36
H0032	TG	Behavioral Assessment - EBM Interventional Professional	15 min	\$22.73
H0004	HM	Behavioral Intervention, Individual – Intervention Paraprofessional	15 min	\$9.07
H0004	HA	Behavioral Intervention, Individual – Intervention Technician	15 min	\$14.10
H0004	HN	Behavioral Intervention, Individual – Intervention Specialist	15 min	\$16.12
H0004	HO	Behavioral Intervention, Individual – Intervention Professional	15 min	\$22.23
H0004		Behavioral Intervention, Individual – EBM Intervention Paraprofessional	15 min	\$14.94
H0004	TF	Behavioral Intervention, Individual – EBM Intervention Specialist	15 min	\$19.28
H0004	TG	Behavioral Intervention, Individual – EBM Intervention Professional	15 min	\$25.71
H2019	HT	Interdisciplinary Training	15 min	\$16.12

99412	HM	Behavioral Intervention, Group – Intervention Paraprofessional	15 min	\$3.63
99412	HL	Behavioral Intervention, Group – Intervention Technician	15 min	\$5.64
99412	HN	Behavioral Intervention, Group – Intervention Specialist	15 min	\$6.44
99412	HO	Behavioral Intervention, Group – Intervention Professional	15 min	\$8.89
99412		Behavioral Intervention, Group – EBM Intervention Paraprofessional	15 min	\$5.97
99412	TF	Behavioral Intervention, Group – EBM Intervention Specialist	15 min	\$7.72
99412	TG	Behavioral Intervention, Group – EBM Intervention Professional	15 min	\$10.29
97110*	HO	Individual Physical Therapy - Professional, by School District	15 min	\$24.60
97110	CQ	Individual Physical Therapy – Physical Therapy Assistant, by School District	15 min	\$20.91
97150	HO	Group Physical Therapy - Professional, by School District	15 min	\$3.73
97161		Physical Therapy Evaluation by School District – Low Complexity - 20 Minutes	1 Evaluation	\$83.70
97162		Physical Therapy Evaluation by School District – Medium Complexity – 30 Minutes	1 Evaluation	\$83.70
97163		Physical Therapy Evaluation by School District – High Complexity – 45 Minutes	1 Evaluation	\$83.70
97164		Physical Therapy Re-Evaluation by School District – Established	1 Evaluation	\$57.56
97165		Occupational Therapy Evaluation by School District – Low Complexity - 30 Minutes	1 Evaluation	\$85.82
97166		Occupational Therapy Evaluation by School District - Medium Complexity – 45 Minutes	1 Evaluation	\$85.82
97167		Occupational Therapy Evaluation by School District - High Complexity – 60 Minutes	1 Evaluation	\$85.82
97168		Occupational Therapy Re-Evaluation by School District – Established	1 Evaluation	\$59.01
97530		Individual Occupational Therapy – Technician by School District	15 min	\$6.23
97530	HM	Group Occupational Therapy – Technician by School District	15 min	\$1.56
97530*	HO	Individual Occupational Therapy – Professional by School District	15 min	\$29.33
97530	HQ	Group Occupational Therapy – Professional by School District	15 min	\$7.33
97530	CO	Individual Occupational Therapy – Occupational Therapy Assistant by School District	15 min	\$24.93
A0080		Transportation by School	1 mile	\$0.44
E1399		Medical Equipment and Supplies by School	N/A	Varies
G9002		RN Assessment and plan by School (Initial = 10 units, Annual = 5 units)	15 min	\$20.38
H2000		Developmental Evaluation (1 unit = 15 minutes)	15 min	\$4.53
H2011	HM	Crisis Intervention – Intervention Paraprofessional	15 min	\$9.07
H2011	HA	Crisis Intervention – Intervention Technician	15 min	\$14.10
H2011	HN	Crisis Intervention – Intervention Specialist	15 min	\$16.12
H2011	HO	Crisis Intervention – Intervention Professional	15 min	\$22.23
H2011		Crisis Intervention – EBM Intervention Paraprofessional	15 min	\$14.94
H2011	TF	Crisis Intervention – EBM Intervention Specialist	15 min	\$18.36
H2011	TG	Crisis Intervention – EBM Intervention Professional	15 min	\$22.73

H2014		Habilitative Skill Building, Individual	15 min	\$14.10
H2014	HQ	Habilitative Skill Building, Group	15 min	\$5.64
H2014	HM	Habilitative Skill Building, Individual – Intervention Paraprofessional	15 min	\$9.07
H2014	HM, HQ	Habilitative Skill Building, Group – Intervention Paraprofessional	15 min	\$3.63
H2017		Skills Building/CBRS - Individual Skill Training by School District	15 min	\$15.44
H2017	HQ	Skills Building/CBRS - Group Skill Training by School District	15 min	\$3.86
H2019	HO	Behavioral Consultation – Intervention Professional	15 min	\$22.23
H2019	TG	Behavioral Consultation – EBM Intervention Professional	15 min	\$22.73
T1001		Supervising RN Visit	Per Visit	\$101.90
T1002		Nursing Services RN Oversight of LPN by School District	15 min	\$20.38
T1002	TD	Nursing Services by School – RN, Skilled	15 min	\$20.38
T1003		Nursing Services by School –LPN, Skilled	15 min	\$14.62
T1013*		Interpretive Services Oral (Only allowed when provided along with another Medicaid reimbursable service)	15 min	\$3.72
T1013*	CG	Interpretive Services Sign Language (Only allowed when provided along with another Medicaid reimbursable service)	15 min	\$15.30
T1019		Personal Care Services by qualified nursing paraprofessional for School District	15 min	\$6.11
T1028		Medical/Social History	15 min	\$9.94
T2001		Non-Emergency Transportation: Patient Attendant/Escort (1:1 service)	15 min	\$1.91
V5008		Hearing Evaluation by School	15 min	\$14.00

*Codes marked with an asterisk may be delivered via Telehealth, using the GT modifier.

Coverage and criteria information is communicated in the Provider Handbook, MedicAide Newsletters and Information Releases at IDMedicaid.com.

For questions related to billing and claims, please contact the appropriate resource:

- **Fee-For-Service Medicaid Participants:**
 - Gainwell Technology – (866) 686-4272

Questions about rates should be directed to the Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1180 or email MedicaidReimTeam@dhw.idaho.gov

Thank you for your continued participation in the Idaho Medicaid Program