

State of Vermont Agency of Human Services 280 State Drive, Center Building Waterbury, VT 05671-1000

Global Commitment Register

November 27, 2024

GCR 24-069 FINAL

Department of Mental Health Fee-For-Service Rate Increase

Policy Summary:

The Vermont Medicaid program increased fee-for-service rates for Department of Mental Health (DMH) funded services by 3%. This increase is a result of funds appropriated by the legislature in Bill H.883. A chart of impacted services and their new rates is available below.

Effective Date: July 1, 2024

Authority/Legal Basis: Medicaid State Plan

<u>Global Commitment to Health Waiver</u>: Waiver authority #5 [Section 1902(a)(13), 1902(a)(30)]; Special Term and Condition #6.8.

H.883 of the 2024 Legislative Session

Population Affected: All Medicaid

Fiscal Impact: The estimated gross annualized budget impact is \$35,302.

Public Comment Period:

The public comment period ended on July 28, 2024. No comments were received.

Additional Information: Department of Mental Health -Website

See the Fee-for-Service Rate Sheet on the following page.



FY 25 Fee for Service Rate Sheet

		3.00%				
SERVICE DESCRIPTION	Procedure codes	FY25 Rates as of 7/1/24	BILLING UNIT	PROVIDER TYPE	PROVIDER SPECIALTY	TELEMEDICINE ALLOWED?
	codes	// 1/24		TIPE	SPECIALIT	ALLOWED
EVALUATION AND MANAGEMENT CODES:						
New Patient, Expanded Problem focused History and Exam; Straightforward Dec Mkg	99202	97.62	Refer to AMA manual	37	S12	YES
New Patient, Detailed History and Exam; Low Complexity Dec Mkg	99203	135.50	Refer to AMA manual	37	S12	YES
New Patient, Comprehensive History and Exam; Moderate Complexity Dec Mkg	99204	231.84	Refer to AMA manual	37	S12	YES
New Patient, Comprehensive History and Exam; High Complexity Dec Mkg	99205	298.51	Refer to AMA manual	37	S12	YES
Estab Patient Minimal problem, physician need not be present, key components not required	99211	10.42	Refer to AMA manual	37	S12	YES
Estab Patient, Problem focused History and Exam; Straightforward Dec Mkg	99212	28.49	Refer to AMA manual	37	S12	YES
Estab Patient, Expanded Problem focused History and Exam; Low Complexity Dec Mkg	99213	58.28	Refer to AMA manual	37	S12	YES
Estab Patient, Detailed History and Exam; Mod Complexity Dec Mkg	99214	89.97	Refer to AMA manual	37	S12	YES
Estab Patient, Comprehensive History and Exam; High Complexity Dec Mkg	99215	126.77	Refer to AMA manual	37	S12	YES
PSYCHIATRY:	Approp E/M					
INITIAL PSYCHIATRIC DIAGNOSTIC EVALUATION- no medical service	Approp E/M 90791	138.19	Refer to AMA manual	37	S12	YES
INITIAL PSYCHIATRIC DIAGNOSTIC EVALOATION- To filedical service	90791	142.65	Refer to AMA manual	37	S12 S12	YES
PSYCHOTHERAPY 30 minutes with indiv or fam member	90792	57.75	Refer to AMA manual	37	S12 S12	YES
	90832	134.72	Refer to AMA manual	37	S12 S12	YES
PSYCHOTHERAPY 45 minutes with indiv or fam member PSYCHOTHERAPY 60 minutes with indiv or fam member	90834	179.62		37	S12 S12	YES
FAMILY PSYCHOTHERAPY- without patient present	90837	179.62	Refer to AMA manual	37	S12 S12	YES
			Refer to AMA manual			YES
FAMILY PSYCHOTHERAPY - with patient present	90847	179.62	Refer to AMA manual	37	S12	
GROUP PSYCHOTHERAPY	90853	56.57	1 unit=1 session	37	S12	YES
ADD ON USED WITH E/M 30 min psychotherapy	90833	48.59	Refer to AMA manual	37	S12	YES
ADD ON USED WITH E/M 45 min psychotherapy	90836	123.68	Refer to AMA manual	37	S12	YES
ADD ON USED WITH E/M 60 min psychotherapy	90838	164.90	Refer to AMA manual	37	S12	YES
ADD ON USED WITH E/M Interactive complexity	90785	5.52	Refer to AMA manual	37	S12	YES
OFFICE CONSULTATION CODES:						
New or Estab Patient, Problem focused History and Exam; Straightforward Dec Mkg	99241	58.23	Refer to AMA manual	37	S12	YES
New or Estab Patient, Problem focused History and Exam; Straightforward Dec Mkg	99242	122.14	Refer to AMA manual	37	S12	YES
New or Estab Patient, Detailed History and Exam; Low Complexity Dec Mkg	99243	170.45	Refer to AMA manual	37	S12	YES
New or Estab Patient, Comprehensive History and Exam; Moderate Complexity Dec Mkg	99244	271.33	Refer to AMA manual	37	S12	YES
New or Estab Patient, Comprehensive History and Exam; High Complexity Dec Mkg	99245	336.53	Refer to AMA manual	37	S12	YES
ALCOHOL AND/OR DRUG SERVICES; CRISIS INTERVENTION (OUTPATIENT), MENTAL HEALTH						
PROGRAM: SUBSTANCE ABUSE; EMERGENCY CARE	H0007	80.62	1 unit = 15 min	37	S12	YES
MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT	H0035	324.18	runic – romin	37	S12	YES
COMPREHENSIVE MEDICATION SERVICE, MENTAL HEALTH PROGRAM: SUBSTANCE ABUSE,		027.10		01	012	125
COMPREHENSIVE MEDICATION SERVICE, MENTAL HEALTH PROGRAM. SUBSTANCE ABUSE,	H2010	75.98	1 unit=1 session	37	S12	YES
CRISIS INTERVENTION SERVICES	H2011	80.62	Refer to DMH Medicaid Manual	37	S12	YES
SKILLS TRAINING AND DEVELOPMENT, SPECIALIZED GROUP REHAB, SKILLS TRAINING AND	L1004.4					
DEVELOPMENT	H2014	12.65	Refer to DMH Medicaid Manual	37	S12	NO
COMPREHENSIVE COMMUNITY SUPPORT SERVICES, PER 15 MINUTES	H2015	34.16	1 unit = 15 min	37	S12	NO
PSYCHOSOCIAL REHABILITATION SERVICE: SPECIALIZED REHAB, PSYCHOSOCIAL	H2017					
REHABILITATION SERVICE	-	34.16	Refer to DMH Medicaid Manual	37	S12	NO
NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP: MILEAGE	T2003	20.30	1 unit = 1 trip	37	S12	NO