

Federally Qualified Health Center- Fee Schedule

| Mental Health Services | | | |
|-------------------------------|----------------------------------|-----------------|--|
| Procedure Code | Service Description | Rate | Service Limits |
| T1015 | All inclusive mental health code | FQHC Daily Rate | Can only be billed once per day per patient. Must include CPT code of mental health service rendered, see public mental health fee schedule for CPT codes. |

| Substance Use Disorder Services | | | |
|--|--|-----------------|---|
| Procedure Code | Service Description | Rate | Service Limits |
| H0001-SC | Alcohol and/or Drug Assessment | FQHC Daily Rate | FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. H0001 Can only be billed once per 12-months per participant per provider unless there is more than a 30 day break in treatment. |
| H0004-SC | Individual Outpatient Therapy | FQHC Daily Rate | Per 15 minute increment. FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. |
| H0005-SC | Group Outpatient Therapy | FQHC Daily Rate | Per 60-90 minute session. FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. |
| H0015-SC | Intensive Outpatient Therapy | FQHC Daily Rate | FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. Per diem with a minimum of 2 hours of services per day. Providers may bill for maximum of 4 days per week. Services for participants who require a minimum of 9 hours of service per week for an adult and 6 hours per week for adolescents. |
| H0016-SC | MAT Initial induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting) | FQHC Daily Rate | FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. Maximum of 4 days per week. Services for participants who require a minimum of 9 hrs of service per week for an adult and 6 hrs per week for adolescents. |
| H0047-SC | Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified | FQHC Daily Rate | FQHC daily rate for SUD can only be billed once per day per patient. Additional service codes should be billed with \$0.00. Provider may bill once per seven days when the patient has been seen at least once during the month; Providers may bill with Induction during the first week only. |