

Provider Bulletin 19-09 June 25, 2019



Non-Standard Rate Level of Care Rate Increase

The purpose of this Bulletin is to inform providers that CBH is implementing a 5% rate increase for nonstandard rate levels of care that have not received an increase within the past five years. CBH will be issuing new Schedule As to reflect the rate increase for eligible providers. The rate increase takes effect July 1, 2019 and will apply to the following levels of care:

(150-1) DETOX HOSPITAL SERVICES (150-2) REHAB HOSPITAL SERVICES (200-1) DETOXIFICATION (200-2) SHORT TERM REHAB (200-7) LONG TERM REHAB (300-30) LAUGUAGE INTERPRETER (300-37) SPECIALIZED AUTISM SERVICES (300-39) OUTPATIENT THERAPY FOR DEAF W/DR. (300-40) OUTPATIENT THERAPY FOR DEAF W/MASTER LEVEL (300-41) SPECIALIZED OUTPATIENT (300-49) THERAPEUTIC FLOOR TIME (300-63) ASSESSMENT (300-74) CRC EVALUATION (300-87) COLLATERAL FAMILY - ENHANCED NON-PSYCH (300-88) FAMILY/COUPLE - ENHANCED, NON-PSYCH (300-144) BEHAVIORAL HEALTH FORENSIC EVALUATION-MDI-TIER I (300-145) BEHAVIORAL HEALTH FORENSIC EVALUATION-MD-TIER II (300-146) BEHAVIORAL HEALTH FORENSIC EVALUATION-MD-TIER III (300-147) BEHAVIORAL HEALTH FORENSIC EVALUATION-MD-ADDENDUM (300-148) BEHAVIORAL HEALTH FORENSIC EVAL-PSYCHOLOGIST TIER I (300-149) BEHAVIORAL HEALTH FORENSIC EVAL-PSYCHOLOGIST-TIER II (300-151) BEHAVIORAL HEALTH FORENSIC EVAL-PSYCHOLOGIST ADDENDUM (300-154) CRISIS INTERVENTION SVS-WALKIN CRISIS (300-160) BEHAVIORAL HEALTH FORENSIC EVAL PSYCHOLOGIST-TIER IV (325-6) LICENSED CHILD PSY.PART. CHILD (325-7) PARTIAL AFTER SCHOOL (400-60) PRESCHOOL FAMILY INTERVENTION (400-81) GROUP TSS - SPECIALIZED (400-98) AFTER SCHOOL WELLNESS PROGRAM (450-1) HOST HOMES - DHS CHILD (450-2) HOST HOMES - NON-DHS CHILD (500-2) R&B AND TREATMENT (550-1) TREATMENT ONLY (550-2) R&B AND TREATMENT (550-7) BIOPSYCHOSOCIAL R&B+TREATMENT (800-3) NON-FIDELITY ACT (800-5) CRISIS RESIDENCE (800-9) ICM: OFFICE/HOME/OTHER

(800-12) RES COOR: OFFICE/HOME/OTHER
(800-16) D&A ICM
(800-19) ACT (ASSERTIVE COMMUNITY OUTREACH)
(800-20) D&A - INTERVENTION
(800-34) CRC EVALUATION - ADULT
(800-35) CRC 23 HOUR HOLDING BED
(900-9) INTENSIVE MAXIMUM CRR
(900-10) MAXIMUM CRR
(900-11) MODERATE CRR
(900-13) LONG TERM RESIDENTIAL
(900-15) RESIDENTIAL SERVICES OTHER
(900-31) OTHER MENTAL HEALTH SERVICES

Please contact your assigned Provider Representative with any questions.