

Mental Health Codes and Maximum Adjusted Fee For Service (FFS) Rate by Date of Rate Change

Prepared by the Behavioral Health Administration, Behavioral Health Payments and Rates Team

April 1, 2025

Notes:

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Rates posted in these charts represent the current estimated minimum to maximum allowed fee-for-service rate for the code and applicable modifier. However, reimbursement may be adjusted based on one or more of the following conditions:

- A. Services are subject to a “cutback” when provided by a master’s level enrolled provider (80% of the maximum allowed rate). The master’s level cutback does not apply to services provided in a Community Mental Health Center (CMHC).
- B. Critical Access Mental Health (CAMH) services are adjusted per legislated rate enhancements [Minnesota Statute \(MS\) 256B.763 Subd. 2](#). Effective 1/1/2025, mandated services are reimbursed at 11.85% over the posted rate when the service is provided by one of the following providers:
 - 1. Psychiatrists and APRNs;
 - 2. CMHC;
 - 3. Mental health clinics and centers certified under [MS 245I.20 Mental Health Clinic](#) designated by the MN Department of Health (MDH) as essential community providers; or,
 - 4. Hospital outpatient psychiatric departments designated by MDH as essential community providers;
 - 5. CTSS providers who did not qualify for the CAMH rate increase on July 1, 2007, received the CAMH increase on 1/1/08 for certain approved services;
 - 6. Mental health clinics certified under section [MS 245I.20 Mental Health Clinic](#) that are not designated as essential community providers.
- C. Mental health (MH) services increased by 5% effective for services rendered on or after 9/1/2014 in accordance with [MS 256B.76 Subd. 1. \(f\)](#).
- D. MH services rate adjustments in accordance with [MS 256B.761 \(e\)](#)
 - 1. Starting on January 1, 2024, the rates will be increased 3% compared to the rates that were in effect on December 31, 2023.
 - 2. Starting on January 1, 2025, the rates will be adjusted every year based on the change in the Medicare Economic Index (MEI). This change will be calculated from the middle of the previous year to the middle of the year for which the new rate is being set, using the MEI forecast from the fourth quarter of the year before. As of the date of this publication providers will not receive the rate adjustment due to delays to MNIT system updates. Once the systems work is completed the MEI will apply and claims will be reprocessed back to 1/1/2025.
- E. Other general notes:
 - 1. An additional **1.8%** over the rate shown is added to payments subject to the MinnesotaCare provider tax.
 - 2. All listed services if provided by the Indian Health Service are reimbursed at the Federal encounter rate. Qualified Tribal Agencies (638) can choose to either receive the Federal encounter rate or the listed rate (MHCP Manual). Federally Qualified Health Centers (FQHC) reimbursement for a mental health encounter is at the facility specific FQHC medical rate.
 - 3. Non-Facility based rates for general providers (covers providers other than CMHC, Psychiatrists, APRNs, [MS 245I.20 Mental Health Clinic](#), and hospital outpatient psychiatric departments who are designated as essential providers).
 - 4. Non-Facility based rates for specialized providers (covers CMHC, Psychiatrists, APRNs, [MS 245I.20 Mental Health Clinic](#), CTSS and hospital outpatient psychiatric departments who are designated as essential providers) who are designated as essential providers.

| Modifier | Definition (Some services require one or more modifiers) |
|-----------|--|
| AG | Primary Care Provider receiving Psychiatric Consultation |
| AM | Consulting Psychiatrist to primary care provider |
| HA | Child or Adolescent |
| HE | Mental Health |
| HK | Intensive or Children’s Day Treatment |
| HM | Adult MH Rehabilitation Worker or Mental Health Behavioral Aide Level II |
| HN | Mental Health Practitioner or Bachelor Degree Level (Clinical Trainee) |
| HQ | Group Modality |
| HR | Family/Couple with Client Present |
| HS | Family/Couple without Client Present |
| TG | Extended Diagnostic Update/Psychiatric Consultation complex/lengthy |
| TS | Adult Diagnostic Update |
| UA | CTSS service package/Children's crisis service package |
| UB | Children's Clinical Care Consultation - 21 to 30 minutes |
| UC | Children's Clinical Care Consultation - 31 minutes and above |
| U1 | Dialectical Behavior Therapy (DBT) |
| U3 | ARMHS Transitioning to community living |
| U4 | Service provided via non face-to-face contact, e.g., telephone |
| U5 | Certified Peer Specialist Level II/ |
| U6 | Interactive Behavioral Health Day Treatment |
| U8 | Children's Clinical Care Consultation - 5 to 10 minutes |
| U9 | Children's Clinical Care Consultation - 11 to 20 minutes |
| 52 | Brief Diagnostic Assessment |
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| Abbreviation | Definition |
|-------------------------|---|
| ACT | Assertive Community Treatment |
| Adult Day Tx | Day Treatment |
| ARMHS | Adult Rehabilitative Mental Health Services |
| BHH | Behavioral Health Home |
| Child Outpatient | Children's Outpatient Mental Health |
| Child Resid Tx | Children’s Residential Treatment |
| CM | Case Manager |
| CNS-MH | Clinical Nurse Specialist in Mental Health |
| Crisis - Adult | Adult Crisis Response Services |
| Crisis - Child | Children’s Crisis Response Services |
| CTSS | Children’s Therapeutic Services and Supports |
| CTSS Day Tx | Children’s Therapeutic Services & Supports Day Treatment Services |
| DBT | Dialectical Behavior Therapy |
| Diag Assess | Diagnostic Assessment |
| IRTS | Intensive Residential Rehabilitative Services |
| LICSW | Licensed Independent Clinical Social Worker |
| LMFT | Licensed Marriage and Family Therapist |
| LP | Licensed Psychologist |
| LPCC | Licensed Professional Clinical Counselor |
| MH | Mental Health |
| MHTCM | Mental Health Targeted Case Management |
| Neuro | Neuropsychological Services |
| NP | Nurse Practitioner with psychiatric specialty |
| OICC | Officer-Involved Community-Based Care Coordination |
| SED | Severe emotional disturbance |
| SPMI | Serious and persistent mental illness |
| | |

MH Procedure CPT or HCPC Codes and Rates 2025 – Version 1.0

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|--------------|------------------|----------|---|---|----------|--|--|---|
| ACT | H0040 | HA | Assertive Community Treatment - Children | County-contracted multidisciplinary treatment teams | Per diem | See table | See table | |
| ACT | H0040 | HK | Assertive Community Treatment - Forensic | County-contracted multidisciplinary treatment teams | Per diem | See table | See table | |
| ACT | H0040 | | Assertive Community Treatment - Adult | County-contracted multidisciplinary treatment teams | Per diem | See table | See table | |
| Adult Day Tx | H2012 | | Adult Behavioral Health Day Treatment | DHS approved: Outpatient Hospital, CMHC, or County Contracted Agency-Multidisciplinary Team: MH Professional, MH Practitioner | 1 hour | \$30.62 This includes the 2024 50% base rate increase | \$33.10 | C D (2 only) |
| ARMHS | 90882 | HM | Community Intervention | DHS Certified MH Rehabilitation Agency - MH Rehabilitation Worker | Session | \$36.51 | \$40.78 | C D |
| ARMHS | 90882 | U3 | Transition to Community Living (TCL) Intervention | DHS Certified MH Rehabilitation Agency - LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation Professional; MH Practitioner | Session | \$48.68 | \$54.36 | C D |
| ARMHS | 90882 | U3 HM | Transition to Community Living | DHS Certified MH Rehabilitation | Session | \$36.51 | \$42.81 | C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|-------|------------------|----------|---|---|---------|---------------------------|--|---|
| | | | (TCL) Intervention by a mental health rehabilitation worker | Agency - MH Rehabilitation Worker | | | | |
| ARMHS | 90882 | | Community Intervention | DHS Certified MH Rehabilitation Agency - LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation Professional; MH Practitioner | Session | \$48.68 | \$54.37 | C D |
| ARMHS | H0031 | | Functional Assessment | DHS Certified MH Rehabilitation Agency-MH Professional; MH Practitioner under the supervision of a MH Professional Clinical Supervisor | Session | \$82.44 | \$92.07 | C D |
| ARMHS | H0031 | TS | Functional Assessment Update/Review | DHS Certified MH Rehabilitation Agency-MH Professional; MH Practitioner under the supervision of a MH Professional Clinical Supervisor | Session | \$82.44 | \$92.07 | C D |
| ARMHS | H0032 | | Individual Treatment Plan | DHS Certified MH Rehabilitation Agency-MH Professional; MH Practitioner under the supervision of a MH Professional Clinical Supervisor | Session | \$94.80 | \$105.88 | C D |
| ARMHS | H0032 | TS | Individual Treatment Plan Update/Review | DHS Certified MH Rehabilitation Agency-MH | Session | \$94.80 | \$105.88 | C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|-------|------------------|----------|---|---|--------|---------------------------|--|---|
| | | | | Professional; MH Practitioner under the supervision of a MH Professional Clinical Supervisor | | | | |
| ARMHS | H0034 | HQ | Medication Education – Group | DHS Certified MH Rehabilitation Agency-Physician; RN; Pharmacist; Physician’s Assistant | 15 min | \$11.04 | \$13.79 | B C D |
| ARMHS | H0034 | | Medication Education – Individual | DHS Certified MH Rehabilitation Agency-Physician; RN; Pharmacist; Physician’s Assistant | 15 min | \$16.98 | \$19.83 | B C D |
| ARMHS | H2017 | HM | Psychosocial Rehabilitation – Individual (basic social & living skills) | DHS Certified MH Rehabilitation Agency-MH Rehabilitation Worker | 15 min | \$12.87 | \$14.37 | C D |
| ARMHS | H2017 | HQ | Psychosocial Rehabilitation – Group (basic social & living skills) | DHS Certified MH Rehabilitation Agency - LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation Professional; MH Practitioner; MH Rehabilitation Worker | 15 min | \$7.55 | \$8.43 | C D |
| ARMHS | H2017 | U3 | Transition to Community Living (TCL) | DHS Certified MH Rehabilitation Agency-MH Rehabilitation Worker | 15 min | \$17.17 | \$19.18 | C D |
| ARMHS | H2017 | U3 HM | Transition to Community Living | DHS Certified MH Rehabilitation | 15 min | \$17.17 | \$19.18 | C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------------|------------------|----------|---|---|-----------------------|---------------------------|--|---|
| | | | (TCL) by a mental health rehabilitation worker | Agency-MH Rehabilitation Worker | | | | |
| ARMHS | H2017 | | Psychosocial Rehabilitation – Individual (basic social & living skills) | DHS Certified MH Rehabilitation Agency-LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation Professional; MH Practitioner | 15 min | \$17.17 | \$19.18 | C D |
| BHH | S0280 | U5 | Behavioral Health Home Services care engagement, initial plan | Certified BHH Providers | One payment per month | \$350.00 | \$372.31 | D |
| BHH | S0281 | U5 | Behavioral Health Home Services ongoing standard care maintenance of plan | Certified BHH Providers | One payment per month | \$245.00 | \$260.61 | D |
| Child Outpatient | 90899 | U8 | Clinical Care Consultation - Face to Face, 5 to 10 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 5 to 10 min. | \$14.10 | \$15.75 | A C D |
| Child Outpatient | 90899 | U8 HN | Clinical Care Consultation - Face to Face, 5 to 10 min | Clinical Trainee (same rate as clinical supervisor) | 5 to 10 min. | \$14.10 | \$15.75 | A C D |
| Child Outpatient | 90899 | U8 U4 | Clinical Care Consultation - Non Face to Face, 5 to 10 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 5 to 10 min. | \$10.57 | \$11.81 | A C D |
| Child Outpatient | 90899 | U8 U4 HN | Clinical Care Consultation - Non Face to Face, 5 to 10 min | Clinical Trainee (same rate as clinical supervisor) | 5 to 10 min. | \$10.57 | \$11.81 | A C D |
| Child Outpatient | 90899 | U9 | Clinical Care Consultation - Face to Face, 11 to 20 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 11 to 20 min. | \$29.14 | \$32.55 | A C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------------|------------------|----------|---|---|---------------|---------------------------|--|---|
| Child Outpatient | 90899 | U9 HN | Clinical Care Consultation - Face to Face, 11 to 20 min | Clinical Trainee (same rate as clinical supervisor) | 11 to 20 min. | \$29.14 | \$32.55 | A C D |
| Child Outpatient | 90899 | U9 U4 | Clinical Care Consultation - Non Face to Face, 11 to 20 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 11 to 20 min. | \$21.85 | \$24.40 | A C D |
| Child Outpatient | 90899 | U9 U4 HN | Clinical Care Consultation - Non Face to Face, 11 to 20 min | Clinical Trainee (same rate as clinical supervisor) | 11 to 20 min. | \$21.85 | \$24.40 | A C D |
| Child Outpatient | 90899 | UB | Clinical Care Consultation - Face to Face, 21 to 30 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 21 to 30 min. | \$47.94 | \$53.52 | A C D |
| Child Outpatient | 90899 | UB HN | Clinical Care Consultation - Face to Face, 21 to 30 min | Clinical Trainee (same rate as clinical supervisor) | 21 to 30 min. | \$47.94 | \$53.52 | A C D |
| Child Outpatient | 90899 | UB U4 | Clinical Care Consultation - Non Face to Face, 21 to 30 min | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 21 to 30 min. | \$35.95 | \$40.15 | A C D |
| Child Outpatient | 90899 | UB U4 HN | Clinical Care Consultation - Non Face to Face, 21 to 30 min | Clinical Trainee (same rate as clinical supervisor) | 21 to 30 min. | \$35.95 | \$40.15 | A C D |
| Child Outpatient | 90899 | UC | Clinical Care Consultation - Face to Face, 31 min plus | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 31 min. plus | \$76.02 | \$84.90 | A C D |
| Child Outpatient | 90899 | UC HN | Clinical Care Consultation - Face to Face, 31 min plus | Clinical Trainee (same rate as clinical supervisor) | 31 min. plus | \$76.02 | \$84.90 | A C D |
| Child Outpatient | 90899 | UC U4 | Clinical Care Consultation - Non Face to Face, 31 min plus | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 31 min. plus | \$57.01 | \$63.67 | A C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------------|------------------|----------|---|--|--------------|---------------------------|--|---|
| Child Outpatient | 90899 | UC U4 HN | Clinical Care Consultation - Non Face to Face, 31 min. plus | Clinical Trainee (same rate as clinical supervisor) | 31 min. plus | \$57.01 | \$63.67 | A C D |
| Child Outpatient | H2027 | HN | Family Psychoeducation - Individual | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$28.34 | \$31.65 | A C D |
| Child Outpatient | H2027 | HQ | Family Psychoeducation - Group, per recipient | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate as clinical supervisor) | 15 min | \$5.68 | \$6.34 | A C D |
| Child Outpatient | H2027 | HQ HN | Family Psychoeducation - Group, per recipient | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$5.68 | \$6.34 | A C D |
| Child Outpatient | H2027 | HQ HR | Family Psychoeducation - Multiple families w/recipients | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate as clinical supervisor) | 15 min | \$7.87 | \$8.79 | A C D |
| Child Outpatient | H2027 | HQ HR HN | Family Psychoeducation - Multiple families w/recipients | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$7.87 | \$8.79 | A C D |
| Child Outpatient | H2027 | HQ HS | Family Psychoeducation - Multiple families w/o recipients | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate as clinical supervisor) | 15 min | \$7.87 | \$8.79 | A C D |
| Child Outpatient | H2027 | HQ HS HN | Family Psychoeducation - Multiple families w/o recipients | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$7.87 | \$8.79 | A C D |
| Child Outpatient | H2027 | HR | Family Psychoeducation - Family w/recipient | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate | 15 min | \$23.79 | \$26.57 | A C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------------|------------------|----------|---|---|----------|---------------------------|--|---|
| | | | | as clinical supervisor) | | | | |
| Child Outpatient | H2027 | HR HN | Family Psychoeducation - Family w/recipient | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$23.79 | \$26.57 | A C D |
| Child Outpatient | H2027 | HS | Family Psychoeducation - Family w/o recipient | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate as clinical supervisor) | 15 min | \$22.98 | \$24.12 | A C D |
| Child Outpatient | H2027 | HS HN | Family Psychoeducation - Family w/o recipient | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$22.98 | \$24.12 | A C D |
| Child Outpatient | H2027 | | Family Psychoeducation - Individual | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee (same rate as clinical supervisor) | 15 min | \$28.34 | \$29.75 | A C D |
| Child Resid Tx | H0019 | | Children's Residential Treatment | County Only | Per diem | Contracted | Contracted | |
| CIBHS | S5145 | HE | Children's Intensive Behavioral Health Services | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Clinical Trainee | Per diem | \$431.23 | \$431.23 | A C D |
| CIBHS | S5145 | HE HN | Children's Intensive Behavioral Health Services | Clinical Trainee (same rate as clinical supervisor) | Per diem | \$431.23 | \$431.23 | A C D |
| Crisis - Adult | 90882 | HK | Community Intervention | DHS Certified MH Rehabilitation Agency-LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation | Session | \$48.68 | \$54.37 | C D |

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|----------------|------------------|--------------------|--|---|----------|---------------------------|--|---|
| | | | | Professional; MH Practitioner | | | | |
| Crisis - Adult | 90882 | HK HM | Community Intervention | DHS Certified MH Rehabilitation Agency-MH Rehabilitation Worker | Session | \$27.66 | \$30.89 | C D |
| Crisis - Adult | H0018 | | Adult Crisis Stabilization – Residential | County Contracted Agency-LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; Certified MH Rehabilitation Professional; MH Practitioner; MH Rehabilitation Worker | Per diem | See table | See table | |
| Crisis - Adult | | Revenue Code: 1001 | Room and Board | | Daily | \$55.72 | \$55.72 | |
| Crisis - Adult | H2011 | HM | Adult mental health crisis assessment, intervention and stabilization - individual | Mental Health Rehab Worker | 15 min | \$18.59 | \$20.76 | C D |
| Crisis - Adult | H2011 | HN | Adult mental health crisis assessment, intervention and stabilization - individual | Mental Health Practitioner | 15 min | \$26.03 | \$29.07 | C D |
| Crisis - Adult | H2011 | HQ | Adult Crisis Stabilization – Group, Non-Residential | County or County Contracted Agency-LP; LICSW; LMFT; LPCC; CNS-MH; Psychiatrist; NP; MH Rehabilitation Professional; MH Practitioner; MH | 15 min | \$9.29 | \$10.38 | C D |

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|----------------|------------------|----------|---|---|--------|---------------------------|--|---|
| | | | | Rehabilitation Worker | | | | |
| Crisis - Adult | H2011 | | Adult mental health crisis assessment, intervention and stabilization - individual | Mental Health Professional | 15 min | \$37.19 | \$41.54 | C D |
| Crisis - Child | H2011 | UA | Child crisis intervention mental health service (Mental Health Crisis Intervention and Stabilization) | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 15 min | \$37.19 | \$41.54 | A C D |
| Crisis - Child | H2011 | UA HN | Child crisis intervention mental health service (Mental Health Crisis Intervention and Stabilization) | Practitioners | 15 min | \$26.03 | \$29.07 | C D |
| CTSS | 90832 | UA | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 30 min | \$64.71 | \$84.80 | A B C D |
| CTSS | 90833 | UA | Psychotherapy, with patient and/or family member when performed with an E&M service | Psychiatrist; NP; CNS-MH | 30 min | \$59.34 | \$77.10 | A B C D |
| CTSS | 90834 | UA | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 45 min | \$85.65 | \$111.28 | A B C D |
| CTSS | 90836 | UA | Psychotherapy, with patient and/or family member when performed with an E&M service | Psychiatrist; NP; CNS-MH | 45 min | \$75.44 | \$98.00 | A B C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------|------------------|----------|---|---|-----------|---------------------------|--|---|
| CTSS | 90837 | UA | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 60 min | \$126.72 | \$164.67 | A B C D |
| CTSS | 90838 | UA | Psychotherapy, with patient and/or family member when performed with an E&M service | Psychiatrist; NP; CNS-MH | 60 min | \$99.87 | \$129.77 | A B C D |
| CTSS | 90839 | UA | Psychotherapy for Crisis | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 60 min. | \$121.62 | \$158.04 | A B C D |
| CTSS | 90840 | UA | Psychotherapy for Crisis (add on to 90839) | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 30 min | \$59.34 | \$77.10 | A B C D |
| CTSS | 90846 | UA | Family Psychotherapy - without patient present | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$80.54 | \$104.65 | A B C D |
| CTSS | 90847 | UA | Family Psychotherapy - with patient present | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$84.03 | \$109.17 | A B C D |
| CTSS | 90849 | UA | Multiple Family Group Psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$30.88 | \$40.09 | A B C D |
| CTSS | 90853 | UA | Group Psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$22.82 | \$29.62 | A B C D |
| CTSS | 90875 | UA | Biofeedback Training | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 20-30 min | \$45.91 | \$59.63 | A B C D |

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|------|------------------|----------|---|---|-----------|---------------------------|--|---|
| CTSS | 90876 | UA | Individual psychophysiological therapy incorporating biofeedback - with psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 45-50 min | \$81.35 | \$105.69 | A B C D |
| CTSS | H0031 | UA | Administering and reporting standardized measures | Mental Health Professional, Mental Health Practitioner | Session | \$82.44 | \$92.07 | C D |
| CTSS | H0032 | UA | Treatment Plan Development and Review | Mental Health Professional, Mental Health Practitioner | Session | \$94.80 | \$105.88 | C D |
| CTSS | H2014 | UA | Skills Training & Development - Individual | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 15 min | \$12.80 | \$14.62 | C D |
| CTSS | H2014 | UA HQ | Skills Training & Development - Group | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 15 min | \$8.60 | \$9.61 | B C D |
| CTSS | H2014 | UA HR | Skills Training & Development - Family | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 15 min | \$16.67 | \$19.05 | C D |
| CTSS | H2015 | UA | Comprehensive Community Support Services (Crisis Assistance) | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 15 min | \$13.65 | \$15.25 | C D |
| CTSS | H2019 | UA | Therapeutic Behavioral Services (Level I MHBA) | Level I MHBA | 15 min | \$6.03 | \$7.53 | B C D |
| CTSS | H2019 | UA HE | Therapeutic Behavioral Services (Direction of MHBA) | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 15 min | \$8.80 | \$10.99 | B C D |

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|-------------|------------------|----------|---|---|---------|---------------------------|--|---|
| CTSS | H2019 | UA HM | Therapeutic Behavioral Services (Level II MHBA) | Level II MHBA | 15 min | \$7.89 | \$9.85 | B C D |
| CTSS Day Tx | H2012 | UA HK | Behavioral Health Day Treatment | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 1 hour | \$48.30 | \$62.77 | B C D |
| CTSS Day Tx | H2012 | UA HK U6 | Behavioral Health Day Treatment - Interactive | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist; Practitioner | 1 hour | \$56.81 | \$73.83 | B C D |
| DBT | H2019 | U1 | Individual DBT Therapy | DHS Certified DBT providers | 15 min | \$40.00 | \$44.67 | C D |
| DBT | H2019 | U1 HN | Individual DBT Therapy | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$40.00 | \$44.67 | C D |
| DBT | H2019 | U1 HQ | DBT Skills Group | DHS Certified DBT providers | 15 min | \$18.16 | \$20.28 | C D |
| DBT | H2019 | U1 HQ HN | DBT Skills Group | Clinical Trainee (same rate as clinical supervisor) | 15 min | \$18.16 | \$20.28 | C D |
| Diag Assess | 90785 | | Interactive Complexity | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | | \$11.55 | \$14.40 | A B C D |
| Diag Assess | 90791 | 52 | Diagnostic Assessment - Brief | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$109.54 | \$153.20 | A B C D |
| Diag Assess | 90791 | 52 HN | Diagnostic Assessment - Brief | Clinical Trainee (same rate as clinical supervisor) | Session | \$109.54 | \$153.20 | A B C D |
| Diag Assess | 90791 | HN | Diagnostic Assessment - Standard | Clinical Trainee (same rate as clinical supervisor) | Session | \$136.93 | \$171.05 | A B C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|-------------|------------------|--------------------|---|--|-----------|---------------------------|--|---|
| Diag Assess | 90791 | | Diagnostic Assessment - Standard | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$136.93 | \$171.03 | A B C D |
| Diag Assess | 90792 | 52 | Diagnostic Assessment (with Medical Service) - Brief | Psychiatrist; NP; CNS-MH | Session | \$122.64 | \$153.20 | A B C D |
| Diag Assess | 90792 | 52 HN | Diagnostic Assessment (with Medical Service) - Brief | Clinical Trainee (same rate as clinical supervisor) | Session | \$122.64 | \$153.20 | A B C D |
| Diag Assess | 90792 | HN | Diagnostic Assessment (with Medical Service) - Standard | Clinical Trainee (same rate as clinical supervisor) | Session | \$153.30 | \$191.50 | A B C D |
| Diag Assess | 90792 | | Diagnostic Assessment (with Medical Service) - Standard | Psychiatrist; NP; CNS-MH | Session | \$153.30 | \$191.49 | A B C D |
| IRTS | H0019 | | Intensive Residential Treatment Services - Adult | County-contracted DHS certified agency multidisciplinary treatment staff | Per diem | See table | See table | |
| IRTS | | Revenue Code: 1001 | Room and Board | | Daily | \$55.72 | \$55.72 | |
| MHTCM | T1017 | HE | Face-to-face encounter – age 18 and over with a SPMI | Indian Health Service – 638 | encounter | Federal rate | Federal rate | |
| MHTCM | T1017 | HE HA | Face-to-face encounter – age 17 and under with a SED | Indian Health Service – 638 | encounter | Federal rate | Federal rate | |
| MHTCM | T2023 | HE | Face-to-face contact – age 18 | County Case Manager | 1 month | See rate | See rate | |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|-------|------------------|----------|---|--|------------|---------------------------|--|---|
| | | | and over with a SPMI | | | | | |
| MHTCM | T2023 | HE | Face-to-face contact – age 18 and over with a SPMI | County-contracted Case Manager | 1 month | See rate | See rate | |
| MHTCM | T2023 | HE HA | Face-to-face contact between CM & client – age 17 and under with SED | County Case Manager | 1 month | See rate | See rate | |
| MHTCM | T2023 | HE HA | Face-to-face contact between CM & client – age 17 and under with SED | County-contracted Case Manager | 1 month | See rate | See rate | |
| MHTCM | T2023 | HE U4 | Telephone contact – age 18 and over with a SPMI | County or county-contracted entity, Case Manager; Case Manager Associate | 1 month | Same rate as face-to-face | Same rate as face-to-face | |
| Neuro | 96116 | | Neuropsychological Assessment - (neurobehavioral status exam) <i>1st hour</i> | DHS approved Psychologist | 1 hour | \$72.49 | \$90.54 | B C D |
| Neuro | 96121 | | Neuropsychological Assessment - (neurobehavioral status exam) <i>each addt'l hour</i> | DHS approved Psychologist | 1 hour | \$59.60 | \$74.43 | B C D |
| Neuro | 96127 | | Brief emotional/behav assmt | DHS approved Psychologist | Assessment | \$3.49 | \$4.34 | B C D |
| Neuro | 96132 | | Neuropsychological Assessment - (neurobehavioral status exam) <i>1st hour</i> | DHS approved Psychologist | 1 hour | \$102.55 | \$128.09 | B C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|--------------|------------------|----------|---|--|---------|---------------------------|--|---|
| Neuro | 96133 | | Neuropsychological Assessment - (neurobehavioral status exam) <i>each addt'l hour</i> | DHS approved Psychologist | 1 hour | \$77.05 | \$96.23 | B C D |
| Neuro | 96136 | | Neuropsychological Testing/Scoring (2+ tests) <i>1st 30 min</i> | DHS approved Psychologist | 30 min | \$33.56 | \$41.90 | B C D |
| Neuro | 96137 | | Neuropsychological Testing/Scoring (2+ tests) <i>each addt'l 30 min</i> | DHS approved Psychologist | 30 min | \$29.80 | \$37.20 | B C D |
| Neuro | 96138 | | Neuropsychological Testing/Scoring - any method (2+ tests) <i>1st 30 min</i> | DHS approved Psychologist | 30 min | \$28.19 | \$35.20 | B C D |
| Neuro | 96139 | | Neuropsychological Testing/Scoring - any method (2+ tests) <i>each addt'l 30 min</i> | DHS approved Psychologist | 30 min | \$28.19 | \$35.20 | B C D |
| Neuro | 96146 | | Neuropsychological Testing - Electronic automated results only | DHS approved Psychologist | Session | \$1.61 | \$2.00 | B C D |
| Neuro | H2012 | HK | Cognitive Rehabilitative Therapy | DHS approved provider agency, Multidisciplinary Team: CNS-MH; LICSW; LMFT; LPCC; LP; MH Practitioner; NP; Psychiatrist | 60 min | \$37.80 | \$47.22 | A B C D |
| Partial Hosp | H0035 | HA | Partial Hospitalization – under age 18 | DHS and Medicare approved: Outpatient Hospital or CMHC, Multidisciplinary Team: MH Professional or MH Practitioner | Session | \$217.17 | \$242.55 | C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|---------------|------------------|----------|---|--|---------|---------------------------|--|---|
| Partial Hosp | H0035 | | Partial Hospitalization – age 18 and older | DHS and Medicare approved: Outpatient Hospital or CMHC, Multidisciplinary Team: MH Professional or MH Practitioner | Session | \$322.40 | \$360.08 | C D |
| Peer - Adult | H0038 | HQ | Self-Help/Peer Services Group Setting | Certified Peer Specialist - Level I or Level II | 15 min | \$7.55 | \$8.43 | C D |
| Peer - Adult | H0038 | U5 | Self-Help/Peer Services | Certified Peer Specialist Level II | 15 min | \$17.17 | \$19.18 | C D |
| Peer - Adult | H0038 | | Self-Help/Peer Services | Certified Peer Specialist Level I | 15 min | \$15.02 | \$16.78 | C D |
| Psych Consult | 99499 | HE AG | Psychiatric Consultation for primary care - face-to-face | Primary care provider | Session | \$35.77 | \$38.05 | D |
| Psych Consult | 99499 | HE AM | Psychiatric Consultation for primary care - face-to-face | Psychiatrist; NP; CNS-MH; LP | Session | \$67.91 | \$69.95 | D |
| Psych Ther | 90832 | | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 30 min | \$64.71 | \$80.80 | A B C D |
| Psych Ther | 90833 | | Psychotherapy, with patient and/or family member when performed with an E&M service | Psychiatrist; NP; CNS-MH | 30 min | \$59.34 | \$74.11 | A B C D |
| Psych Ther | 90834 | | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 45 min | \$85.65 | \$106.96 | A B C D |
| Psych Ther | 90836 | | Psychotherapy, with patient and/or | Psychiatrist; NP; CNS-MH | 45 min | \$75.44 | \$94.21 | A B |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------|------------------|----------|---|---|---------|---------------------------|--|---|
| | | | family member when performed with an E&M service | | | | | C D |
| Psych Ther | 90837 | | Psychotherapy, with patient and/or family member | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 60 min | \$126.72 | \$158.28 | A B C D |
| Psych Ther | 90838 | | Psychotherapy, with patient and/or family member when performed with an E&M service | Psychiatrist; NP; CNS-MH | 60 min | \$99.87 | \$124.75 | A B C D |
| Psych Ther | 90839 | | Psychotherapy for Crisis | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 60 min. | \$121.62 | \$151.92 | A B C D |
| Psych Ther | 90840 | | Psychotherapy for Crisis (add on to 90839) | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 30 min | \$59.34 | \$74.11 | A B C D |
| Psych Ther | 90846 | | Family Psychotherapy <i>without</i> patient present | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$80.54 | \$100.59 | A B C D |
| Psych Ther | 90847 | | Family Psychotherapy <i>with</i> patient present | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$84.03 | \$104.95 | A B C D |
| Psych Ther | 90849 | | Multiple Family Group Psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$30.88 | \$38.55 | A B C D |
| Psych Ther | 90853 | | Group Psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$22.82 | \$28.49 | A B C D |

| Type | CPT or HCPC Code | Modifier | Service Name | Eligible Providers | Unit | Base Rate (minimum rate*) | Enhanced Legislative Rates (maximum rate*) | Notes (see notes above Sections A through E may apply*) |
|------------|------------------|----------|--|---|-----------|---------------------------|--|---|
| Psych Ther | 90875 | | Individual psychophysiological therapy incorporating biofeedback, with psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 20-30 min | \$45.91 | \$57.18 | A B C D |
| Psych Ther | 90876 | | Individual psychophysiological therapy incorporating biofeedback, with psychotherapy | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | 45-50 min | \$81.35 | \$101.59 | A B C D |
| Testing | 90887 | HN | Explanation of Findings | Clinical Trainee (same rate as clinical supervisor) | Session | \$67.93 | \$84.83 | A B C D |
| Testing | 90887 | | Explanation of Findings | CNS-MH; LICSW; LMFT; LPCC; LP; NP; Psychiatrist | Session | \$67.93 | \$84.83 | A B C D |
| Testing | 96130 | | Psychological Testing - <i>1st hour</i> | LP; clinically-supervised clinical psychology trainee | 1 hour | \$95.31 | \$119.04 | B C D |
| Testing | 96131 | | Psychological Testing - <i>each addt'l hour</i> | LP; clinically-supervised clinical psychology trainee | 1 hour | \$67.93 | \$84.83 | B C D |
| Travel | H0046 | | Mental Health Provider Travel Time | Any qualified MH provider (except case managers and children's day treatment) | 1 min | \$0.52 | \$0.58 | C D |

Legal references

- A. Masters level cutback 256B.0625 Subd. 38
- B. Critical Access Rate Increase 256B.763 <https://www.revisor.mn.gov/statutes/cite/256B.763>
- C. Mental health services five percent rate increase MN Statute 256B.76 Subd. 1 (f).
- D. Three percent rate increase for services included in the 2024 MHCP Outpatient Rate Study 256B.761 (e) <https://www.revisor.mn.gov/statutes/cite/256B.761>
- E. Inflationary adjustment for services included in the 2024 MHCP Outpatient Rate Study 256B.761 (e) <https://www.revisor.mn.gov/statutes/cite/256B.761>

Contact Information

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