

APIA Behavioral Health Fees

| Medicaid/Private Insurance Code | Service | Fee |
|---------------------------------|--|-----------|
| 90832 | Individual Psychotherapy 30 minutes | \$ 238.00 |
| 90834 | Individual Psychotherapy, 45 minutes | \$ 268.00 |
| 90837 | Individual Psychotherapy, 60 minutes | \$ 268.00 |
| 90846 | Family psychotherapy (without the patient present) | \$ 378.00 |
| 90847 U7 | Family psychotherapy (conjoint psychotherapy) (with patient present) per 15 minutes | \$ 145.00 |
| 90847 | Family psychotherapy (conjoint with patient present) 30 minutes | \$ 291.00 |
| H0031/90791 | MH Integrated Assessment Not MD | \$ 541.00 |
| H0001/96156 | Substance Abuse Assessment (Health Behavior Assessment/Reassessment) | \$ 547.00 |
| H0046/96151 | Client Status Review | \$ 60.00 |
| S9484-U6 | Crisis intervention mental health services, 15 minutes | \$ 23.00 |
| S9484 | Crisis intervention mental health services, 60 minutes | \$ 247.00 |
| H0038-HR | Family Therapeutic Behavioral Health Services Without Patient Present, per 15 minutes | \$17.00 |
| H2019-HR | Family Therapeutic Behavioral Health Services with Patient Present, per 15 minutes | \$ 17.00 |
| H2015-HQ | Group Comprehensive Community Support Services, per 15 minutes | \$ 89.00 |
| H2019-HQ | Group Therapeutic Behavioral Health Services, per 15 minutes | \$17.00 |
| 90853-U7 | Psychotherapy, Group, 30 minutes | \$130.00 |
| 90853 | Psychotherapy, Group 60 minutes | \$ 238.00 |
| 96158 | Health Behavior Intervention, Individual, Face to Face 30 minutes | \$389.00 |
| 96159 | Health Behavior Intervention, additional 15 minutes | \$152.00 |
| 96164 | Health Behavior Intervention, group (2 or more patients), Face to Face, 30 minutes | \$72.00 |
| 96165 | Health Behavior Intervention, Group, additional 15 minutes | \$35.00 |
| 96167 | Health Behavior Intervention, Family (with patient present), Face to Face, 30 minutes | \$414.00 |
| 96168 | Health Behavior Intervention, Family additional 15 minutes | \$165.00 |
| T1023 | Screening for participation, per encounter | \$35.00 |
| 99408 | Screening, Brief Int. & Referral for Treatment (SBIRT) | \$172.00 |
| Q3014 | Telehealth Originating Fee | \$62.43 |

**Fees are based on a per unit price. Some services require multiple units and/or include additional fees.
Fees are billed in increments only. Fees are subject to change.**