<u>Temporary</u> Medicaid Youth Mental Health Fee Schedule <u>March 16, 2020 July 1, 2021</u>

Community Based Psychiatric Rehabilitation & Support and Extraordinary Needs Aide Services

Service	Procedure	Modifier 1	Modifier 2	Unit	Reimburse- ment	Limits
Community-based psychiatric rehabilitation & support – group	H2019	No Modifier	No Modifier	15 min.	\$2.11 <u>\$2.17</u>	4 hours per day or 16 units
Extraordinary Needs Aide Services	H2019	TG	No Modifier	15 min.	\$7.05	None

Note: This fee schedule reflects changes in the April 24, 2020 provider notice related to changes to Youth Community-Based Psychiatric Rehabilitation & Support (CBPRS) Services during the statewide emergency declared in Executive Orders 2-2020 and 3-2020. These changes are retroactively effective March 16, 2020 July 1, 2021 and this temporary fee schedule will remain in effect through the remainder of the COVID-19 epidemic.

All other fees and limits remain as listed in the July 1, 201921 Medicaid Youth Mental Health Fee Schedule.